SIGMUND FREUD

Three Essays on the Theory of Sexuality

THE 1905 EDITION

"Freud's *Three Essays on Sexuality* stands beside his *Interpretation of Dreams* as his most momentous and original contributions to human knowledge." JAMES STRACHEY

Three Essays on the Theory of Sexuality

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The 1905 Edition

BY

SIGMUND FREUD

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Foreword: The Missing Object

by Philippe Van Haute, Herman Westerink, and Ulrike Kistner

Sigmund Freud published the first version of *Three Essays on the Theory of Sexuality* in 1905, the same year in which he published *Fragment of an Analysis of Hysteria* ("Dora") and *Jokes and Their Relation to the Unconscious*. These three books, together with others written in that period, can only be properly understood through the intrinsic reference that binds them to one another. These three books illuminate each other and Freud's thinking in that period.

But something strange happened in the subsequent editions of *Three Essays* and their reception. Freud kept rewriting his *Three Essays* over the years. He republished them four times between 1905 and 1924, and each time he added large paragraphs in which he explained the theoretical insights that he had developed in the meantime. As a result, the 1924 edition of the text is twice as long as the original one, and it contains theoretical insights that bluntly contradict Freud's original positions of 1905. It is this 1924 edition that was published in the final "officially approved" collection of Freud's works. This at least partly explains why the first edition of *Three Essays* was never published in any language other than German. In this way, the first edition became like a missing object that every Freud scholar referred to as "1905d," but that in fact was absent and unknown. At the same time, the officially approved version of 1924 was a decontextualized version no longer bound to Freud's 1905 projects and thoughts.

This situation has undoubtedly had dramatic effects. Of course, it is well known that the text of *Three Essays* that we find in *Gesammelte Werke* and the *Standard Edition* is not the original version of 1905. James Strachey did a very good job in indicating—though with some omissions[1]—the various changes and additions that were introduced between 1905 and 1924. But even the most experienced Freud readers have a very hard time distinguishing between passages that were introduced at different moments and that for that very reason belong to different theoretical contexts and have to be judged accordingly. It comes as no great surprise then that the psychoanalytic tradition—and this is only one example among many—consistently gives an oedipal interpretation of the Dora case, whereas there is not one reference to the Oedipus complex[2] in the 1905 edition. Quite the contrary, according to this edition, the crucial problematic that lies at the basis of hysteria is not this famous complex, but bisexuality. Reading Dora against the background of the 1905 edition reveals a picture different from the one that emerged when the case history is read against the background of the 1924 edition.

But this is not all. The very idea of an Oedipus complex would have been a theoretical impossibility in 1905. Indeed, the complex implies that infantile sexuality is object-related. But in 1905, Freud consistently thematizes infantile sexuality as essentially autoerotic. Infantile sexuality is "without an object." This also explains why Freud links oedipal themes in the first edition to (object-related) pubertal sexuality. This view is in direct contradiction with the historiographic tradition that until today claims that psychoanalysis starts at the very moment when Freud gave up the theory of seduction (his "neurotica") in 1897, and reinterpreted the stories of his patients as the disguised expressions of oedipal fantasies. The history of Freudian thinking is in fact far more complicated than many would think, and the first edition of *Three Essays* is a crucial element in this history. Hence the importance of its translation.

The first edition of *Three Essays* is not only important for historical reasons. Psychoanalysis has been severely criticized in the past—and with good reason—for its heteronormative approach to sexuality. This approach can take many forms, but it is almost always linked to one of the many versions of the Oedipus complex. A critique of psychoanalytic heteronormativity, therefore, would have to entail a critique of the role accorded to the Oedipus complex. The first edition of *Three Essays*

contains a theory of sexuality that in no way anticipates the later oedipal theories. Quite the contrary, the 1905 edition identifies infantile sexuality with nonfunctional pleasure, and discusses this relation without any reference to an object or to sexual difference. This approach allows for a critique of a binary conception of sexuality and, more generally, of sexual identity politics characterizing not only conservative theories, but also many feminist theories of sexuality.

In this first edition, Freud further conceptualizes a "pathoanalysis" of (sexual) existence. In order to understand the (sexual) existence of the human being, one has to start from psychopathology. Psychopathology shows us in a magnified way the tendencies and problematics that we all have to deal with. In this way, psychiatry and psychopathology attain an anthropological significance. They inform us less about diseases or disorders than about the human being as such. This idea undermines the distinctions between "normal," "abnormal," and "pathological."

All of this means, more concretely, that Freud's first theories of sexuality resonate with later philosophers who, writing on related subjects, attempt to overcome heteronormative logics. One can think for instance of the writings of Foucault and Deleuze, and of queer theory. The first, "missing" edition of *Three Essays* would undoubtedly be an important document in a debate on the possibility of developing a psychoanalytic metapsychology that escapes the heteronormavity characterizing it until today. This is an urgent task if psychoanalysis is to become once again what it always claimed to be: a subversive theory of subjectivity.

But even as the first edition articulates a new revolutionary theory of sexuality, it also remains stuck, to some extent, in age-old prejudices about sex and sexuality. The structural presence of these prejudices makes the text ambiguous and inconsistent, while at the same time showing the problematic that Freud was trying to articulate. Precisely because this text illuminates, rather than simply neglects, the uncertainties and ambiguities with which many of us struggle, it might show us a possibility or possibilities for inventing new ways of thinking about sexuality that transcend the "heterosexual matrix" that in many respects conditions our lives.

We cannot turn to *Three Essays* for rethinking the foundations of psychoanalytic theory without freeing the text from the later additions that risk hiding its originality from our sight, and without also carefully

looking at the passages that were deleted in later versions. The 1905 edition is only partially and indirectly available in English through Brill's seldomreferenced translation of the second edition of 1910, Strachey's translation of the edition of 1924 in the *Standard Edition*, and Shaun Whiteside's more recent translation of that same edition. These translations undoubtedly have many merits, but they also have their limitations. The fact that the 1905 edition of *Three Essays* has never been translated before creates a welcome opportunity for a more literal translation that at the same does justice to the subtleties of Freud's concepts. Only in this way can we measure the importance of this foundational text. Hence the necessity of a separate edition and a critical introduction that locates the first edition of *Three Essays* in its historical context and examines its differences from the later versions.

Introduction: Hysteria, Sexuality, and the Deconstruction of Normativity—Rereading Freud's 1905 Edition of *Three Essays on the Theory of Sexuality*

by Philippe van Haute and Herman Westerink

The 1905 edition of *Three Essays on the Theory of Sexuality* has only 83 pages—a short text in comparison with the studies on sexuality published by Freud's predecessors in this field. But when reading it one is struck by its conceptual density and fluid interplay of ideas as well as its radical points of view. In many ways the three essays on sexual aberrations, infantile sexuality, and the transformations of sexuality in puberty are truly extraordinary. Freud himself recognized this and regarded the essay collection as one of his key publications. It was for this reason that he not only reissued the text four times (1910, 1915, 1920, 1924), but each time also made the effort of rewriting it. While in the later editions Freud would occasionally delete or change sentences and short passages, the process of recomposing the text mainly consisted of inserting additional material. One might expect that these new passages would contribute to the original theory of sexuality by filling theoretical gaps and answering open questions. The various editions of the text would then show continuity through the further clarification and systematization of ideas. A closer look at the various editions, however, reveals that the contrary is the case. The inserted elements contain new theoretical material fundamentally disrupting the original ideas and perspectives.[1] Of course,

the two decades stretching between the first and last editions of *Three Essays* had seen fundamental changes in Freud's thinking. These transformations and new insights found their way into each of the various editions. The final text of 1924 is thus a complex one, reflecting two decades of transformations in psychoanalytic thought.

Our commentary on the 1905 edition obviously cannot deliver an in-depth analysis of the various editions, since such an analysis would have to include a thorough account of these transformations. We will only briefly sketch their main aspects as they emerge in the later editions. Our task here is to provide a reading of *Three Essays* that explores its central concepts and the composition of its ideas. By doing so, we will be able to highlight the character, content, and often-neglected potential of the text. We say neglected because, unlike most other readings of the text, ours will not have its starting point in the later editions of the text that carry the weight of the further developments in Freud's thought. When reading or commenting upon the 1905 edition, one has to take into account that many of the concepts and constructs generally considered fundamental to psychoanalytic theory had not yet been defined or even introduced. In 1905, Freud had not yet articulated his theory of the Oedipus complex, nor had he focused his attention on the obsessional neurotic problematic of love, hate, ambivalence, identification, conscience, and guilt that would lead him to identify this complex. He had not yet formulated a theory of the drives, nor had he introduced his theory of narcissism, in which he would express his views on the relation between the drive economy and object relations. He had not yet quarreled with Carl Gustav Jung over psychosis and the theory of the libido. At this point, he had not committed himself to a developmental approach in thinking about the relation between early childhood, puberty, and adulthood. His interest in cultural phenomena like art and religion had hitherto been limited. We cannot read the 1905 edition of *Three Essays* as if these aspects of Freud's thought were already potentially or actually present.

Studies in Sexuality

Our point of departure is linked to an issue introduced on the very first page of *Three Essays*: its place within the body of work on sexuality, perversion, and pathology established in late nineteenth-century

psychiatry, neurology, and sexology. Does Freud continue the modes of reasoning and conceptual frameworks presented in the literature he refers to in the first endnote of the text—the major writings of Richard von Krafft-Ebing, Havelock Ellis, Albert Moll, Iwan Bloch, and others from the 1880s and 1890s, and the contemporary literature published in the first years of the twentieth century, for example, in Magnus Hirschfeld's *Jahrbuch für sexuelle Zwischenstufen*? Or does he develop something radically new—so new that the relation to these predecessors must be described in terms of a radical break? It is part of Freud's rhetorical strategy in the first pages of *Three Essays* to distance himself from the established body of thought on sexuality. Eminent predecessors are reduced to a footnote in a text that presents itself as opposed to "popular opinion" and the "poetic fable."[2] According to Freud, psychiatrists, neurologists, and sexologists had generally approached sexuality from a Darwinian perspective, focusing on the genital drive (*Geschlechtstrieb*[3]*)* as the manifestation of the reproduction instinct in the service of the preservation of the species.[4] From this perspective, which underscored the functionality of the human drives, sexuality had its analogy in hunger as the expression of the need for ingestion in the service of self-preservation. Within this scheme, Freud identifies a number of mistaken views on sexuality: namely, that it was absent in childhood, gaining momentum only in puberty after the sexual organs had come to full maturation, and that it was aimed at procreative sexual acts with heterosexual partners.

No doubt Freud is referring here to some key aspects of the contemporary scientific and societal consensus on the nature of sexuality. In the opening passages of *Psychopathia Sexualis* (1886), Krafft-Ebing (1840–1902) had stated that sexuality ought to be defined in terms of its natural function in the service of reproduction. This reproduction should not be regarded as the result of individual sexual preferences, but as the necessary and normal expression of a strong natural instinct for the preservation of the mental and physical capacities of the individual.[5] Formulated in this way, the Darwinian principles of the preservation of the individual and the species were closely related: preservation of the species was in fact motivated by the instinct of self-preservation. Reproduction was the means by which the life of the individual could be preserved beyond its intrinsic spatial and temporal limitations, as the individual's

traits and capacities were preserved in future generations. Sexuality was thus defined in purely functional terms as a means toward an end. It was reproduction in the service of preservation that defined normal sexual acts and the normal choice of sexual partners. Only procreative sexual acts were considered normal. This functional understanding of sexuality was the underlying conception for Krafft-Ebing's views on pathology in general and sexual perversions in particular. It was likewise this functional understanding of sexuality that determined his identification of abnormal sexuality or, in Krafft-Ebing's words, the "anomalies of the sexual function," that is, sexual deviations from the norm of reproduction.[6] He distinguished four categories of such functional anomalies. The first category was paradoxia. This was either the manifestation of the genital drive in early childhood as evidenced in masturbation (often causing degenerative neuroses or psychoses) or the remanifestation of the genital drive in old age, most often in relation to senility. Krafft-Ebing defines this anomaly in terms of the sexual organs not yet or no longer properly functioning. The second category was sexual anesthesia, or absence of the genital drive, which mostly resulted from psychic degeneration or from cerebral or other anatomical defects. The third category was hyperesthesia, or abnormally increased genital drive, which was most often found in adults with a neuropathic constitution as manifested in neurasthenia or hysteria, for example. The fourth functional anomaly was the one Krafft-Ebing was most interested in: paresthesia, or sexual perversions. He presents the following definition of perversion: "With opportunity for the natural satisfaction of the sexual instinct, every expression of it that does not correspond with the purpose of nature—i.e., propagation—must be regarded as perverse."[7] Every manifestation of the genital drive that is non-procreative is a perversion. It is this criterion of the natural function of the genital drive that links the four main perversions to each other. After all, sadism, masochism, fetishism, and inversion (soon further differentiated into homosexuality and bisexuality) have nothing essential in common beyond their non-procreativity. They are different sexual activities and interests in which sexual pleasure and satisfaction are obtained while detached from the natural instinct of reproduction.

We find a similar train of thought about the relation between sexuality and reproduction in the writings of the Berlin neurologist and sexologist Albert Moll (1862–1939). Like Krafft-Ebing's, his work was an important

point of reference in *Three Essays*, and was recognized in the 1905 edition for its contribution to the scientific study of contrary sexual feeling (inversion) and infantile sexuality. In his book on the sexual libido (1898), Moll had paid a lot of attention to the relation between the genital drive and reproduction. Reflecting on the basic principles of Darwinism, he had argued that the sole function of the genital drive of men and women was procreation. In nature heterosexuality is therefore the normal inherited disposition in service of what Moll calls "the principle of teleology"—reproduction.[8] The individual development and feeling of sexuality was merely the subjective side of the objective reproduction instinct. All individual physiological and psychological sexual processes could be explained by this instinct. According to Moll, the genital drive was composed of two complementary impulses. The "detumescence impulse" was a natural urge that produced the transformation of the genitals (with the aim of ejaculation during coitus), including the increase of feeling in the genitals (with the aim of sexual satisfaction). The "contrectation impulse" paralleled the first and consisted of an inclination to gently approach, touch, and kiss a person of the opposite sex.[9] It was theories such as Moll's, in which the combination of physiological developments and mental processes (desire, attachment) during and after puberty was in the service of reproduction, that Freud calls a "poetic fable."

By opposing the "popular opinion," Freud distanced himself from an authoritative medical opinion shared by the main contemporary experts in the field of the scientific study of sexuality.[10] Before we take a closer look at Freud's 1905 theory of sexuality, however, we should put his relation to his predecessors in perspective. There are, after all, very good reasons not to regard Freud's work as radically opposing a whole body of medical thought on sexuality. It is most important to recognize that Krafft-Ebing, Moll, and others had paved the way for Freud's *Three Essays*. In fact, these scholars had anticipated many of his ideas, including first of all, the conceptualization of sexuality as a prevailing natural drive that is also the most powerful force in cultural development, notably in social bonding and family life, morality, religion, and art.[11] This conceptualization implied that the medical study of sexuality could never be limited to pathological deviations originating from inherited and degenerative dispositions. Even though Krafft-Ebing was primarily interested in the

etiology of the perversions, he realized that his study of pathological sexual deviations contributed to a much broader insight into the role of human sexual impulses in culture and throughout history. This idea was a precursor to Freud's insight that any theory of sexuality would have a general anthropological dimension, and that the sexual drive and its sublimation were culturally productive. It was his predecessors who had put sexuality on the map as a fundamental aspect of both human nature and cultural life.

This broader view of sexuality and culture, together with the conceptualization of sexuality in terms of a "natural drive," imbued the writings of Freud's predecessors with a powerful emancipatory potential. This was not only evidenced in the writings of Krafft-Ebing and Moll, but also and especially in the *Jahrbuch für sexuelle Zwischenstufen*. Here we find a marked tendency toward a critique of the criminalization of so-called sexual perverts. After all, when sexual pathology could no longer be thought of as resulting from perverse sexual acts, but, on the contrary, the perverse sexual acts were understood as originating from a neuropathic disposition, homosexuals could not be regarded as morally responsible for their sexual inclinations. Instead of having juridical procedures invoked against them, they should receive therapeutic treatment—this is a typical train of thought in the literature on sexual perversions.[12] And although Freud does not devote himself to juridical issues in *Three Essays*, his text on cultural sexual morality written a few years later closely connects with such ideas on abnormal dispositions and the way society should deal with the variety of sexual urges and aims.[13]

The second area in which earlier scholars anticipated Freud's ideas concerns the identification of the four basic types of sexual deviations: sadism, masochism, fetishism, and inversion. Krafft-Ebing had in fact invented the categories of sadism and masochism, and had introduced them as two of the four fundamental forms of deviation from normal sexuality, that is, as non-procreative sexual activities. It was also Krafft-Ebing and Moll who had pioneered the concepts of homosexuality and pedophilia in the 1890s. It is fair to say that their Darwinian, functional approach led to the identification of these sexual perversions as the nonfunctional counterparts to normal sexuality. In the first of the three essays, on sexual aberrations, Freud approvingly identifies these four fundamental forms as the main sexual perversions. Nevertheless, as we

will see below, Freud will strongly oppose the functional approach of his predecessors, which leads him to a fundamentally new perspective on the relation between pathology and normality. This brings us to the next issue.

The third development that paved the way for Freud's *Three Essays* was that Krafft-Ebing, Moll, and others had implicitly undermined their own basic assumptions about the opposition between sexuality and the perversions. Although they would never abandon the strict distinction between the normal sexual instinct and its perverse pathological deviations, both Krafft-Ebing and Moll increasingly shifted their attention toward the gradual differences between normal and abnormal. In Krafft-Ebing's *Psychopathia Sexualis* this shift can already be detected in his views of hyperesthesia and paresthesia. When describing sadism, for example, he argued that the close relation between pleasure and cruelty was not specific to sadism or masochism, but should in fact be regarded as originating from general human physiological and psychological characteristics, such as the opposition between the active male and passive female roles in sexual relations. He also recognized a close relation between certain aggressive acts (such as biting) and the nature of sexual excitation. The conclusion drawn by Krafft-Ebing undermined his basic assumptions. He writes: "Sadism is thus nothing else than an excessive and monstrous pathological intensification of phenomena—possible, too, in normal conditions in rudimental forms—which accompany the psychical sexual life, particularly in males."[14] This definition of sadism is typical for what gradually becomes the predominant view of sexual deviations: clinical case material shows that it is virtually impossible to make sharp qualitative distinctions between the normal and the pathological. Perversions like sadism can be seen as exaggerations and intensifications of normal sexual impulses and acts. In this context, his views about sexual inversion also changed, notably in the studies on homosexuality. Although Krafft-Ebing et al. never abandoned the paradigm of heterosexuality as the normal functional form of sexuality, new insights into homosexuality blurred the sharp distinction between masculinity and femininity.[15] Again Krafft-Ebing had shown the way, suggesting that both innate and, later, acquired homosexuality originated from what he identified as constitutional hermaphroditism or bisexuality. Indeed, in one of his last articles, published in 1901, he stated explicitly that one should think of homosexuality as originating from what was

essentially the human being's earliest embryonic disposition, hermaphroditism or bisexuality.[16]

Defining homosexuality in terms of an intermediate stage—recall the title of the above-mentioned *Jahrbuch* (yearbook)—was the next logical step. In the opening article of the yearbook's first volume (1899), German sexologist Magnus Hirschfeld (1868–1935) argued that homosexuality was indeed to be considered an intermediate form of sexuality that could be explained in terms of the gradual, quantitative differences between men and women. Sexual deviations should preferably be interpreted in terms of variations within the larger spectrum of sexual gradations and individual expressions.[17] In other words, the clinical evidence showed that sexuality could not simply be differentiated or categorized in terms of a functional, natural instinct or its degenerative deviations. There were other aspects to be considered, most importantly the nature of sexual relations and the choice of objects; sexual excitation, pleasure, and satisfaction; and the individual's sexual needs. German dermatologist and sexologist Iwan Bloch (1872–1922) concluded the following from the vast amount of material on perversions and perversities (the latter term was coined by Krafft-Ebing to indicate the immoral sexual acts of normal people), and the observation that abnormal sexual conduct was present in all civilizations: sexual aberrations are not based on a neuropathic disposition, but should be seen as general human traits resulting from increased and intensified impulses.[18] It was Freud who recognized this conclusion's revolutionary potential. Most sexual aberrations cannot be isolated from normal sexual life; and if sexual aberrations cannot be explained in terms of a neuropathic (inherited, degenerative) disposition, they can only be defined relative to a general human sexual disposition—described by Bloch and others in terms of an increase or intensification of certain sexual impulses. In this train of thought, in which the difference between normal and abnormal sexuality is merely quantitative, these increased sexual impulses inform us not only about pathologies, but also, and more importantly, about human nature in general. It is in this direction that Freud will proceed.

The Dismissal of the Functional Approach to Sexuality

Three Essays was written within the context of these developments in the scientific (medical, psychiatric) study of sexuality. But Freud immediately makes clear that he radically rejects the premises and paradigms that his predecessors never fundamentally questioned, despite the fact that their clinical material provided many opportunities for them to do so. Dismissing the functional approach to sexuality as "fable," Freud starts where his predecessors left off: the multitude of variations in human sexual life. In order to get a grip on these variations, Freud's own starting point is the distinction between the sexual object ("the person from whom the attraction proceeds") and the sexual aim ("the action toward which the drive impels").[19] In taking this starting point, Freud turns the approach of his predecessors upside down. They took the natural genital drive as the norm against which to identify pathological objects and aims, and categorize the deviations. Freud, by contrast, wants to study the sexual drive (*Sexualtrieb*) from the perspective of the variety of sexual objects and aims. Since the human sexual drive is not naturally organized by an inherent norm or according to some innate functional principle, there is indeed nothing but a variety of sexual activities and orientations in which there is no purely normal or absolutely abnormal sexuality. Let us have a closer look at the first of the three essays to explore this.

After the introductory remarks, Freud continues his chapter on sexual aberrations with a discussion of the deviations in relation to the sexual object. He primarily concentrates on homosexuality (inversion). Whereas Krafft-Ebing et al. had been primarily interested in the question of the etiology of innate and acquired homosexuality, Freud is not particularly interested in solving this riddle. Rather, he argues that inversion cannot be strictly separated from other forms of sexuality, because of its wide spectrum of variations. He then continues with a critique of the most common explanations—that is, innateness, degeneration, and anatomical bisexuality (hermaphroditism)—and critically comments on the distinction between innate and acquired homosexuality.[20] Instead of formulating alternative approaches and answers to the question of etiology, Freud focuses on the observation of homosexuality in and outside of the clinical setting. These observations are as follows: Firstly, homosexuality can be found in many persons who hardly deviate from the common sexual norm. Secondly, homosexuality does not disturb a person's achievements—on the contrary, homosexuals are often highly

advanced intellectually and morally. Thirdly, homosexuality can be found in all civilizations; however, the moral evaluation of homosexuality in different cultural contexts varies. From this he basically concludes that homosexuality as such cannot be classified as abnormal. This means that the established views on the distinction between normal and abnormal sexuality need to be reconsidered. Homosexuality cannot be interpreted in terms of a neuropathic deviation, but should actually be seen as a modus of sexuality.[21] Freud also points to the fact that homosexuality can be viewed as a sexual aberration only with regard to its object, that is, the person from whom attraction proceeds (and whom one is subsequently attracted to), but not with regard to the sexual aims.

The most important conclusion Freud draws from his observations of homosexuality opens up a whole new theoretical realm, requiring a reconsideration of the relation between the sexual drive and the sexual object: there is no inherent object of an alleged natural sexual drive. “The genital drive,” he writes, “is probably independent of its object in the first instance; and its origin is likely not owed to the object’s attractions.”[22] The idea that the sexual drive is independent of an object—that it expresses itself in a non-intersubjective way and does not in any way depend on the presence of an object—has far-reaching consequences for understandings of sexuality in general. The implication is that originally all human sexuality is strictly nonfunctional. All references to the reproduction instinct, self-preservation, and preservation of the species implied the notion of the inherent object of the natural reproduction instinct.[23] Throughout *Three Essays*, this nonfunctional understanding of infantile sexuality is captured in the fundamental distinction Freud makes between the sexual drive (*Sexualtrieb*) and the genital drive (*Geschlechtstrieb*), with the latter indicating adolescent and adult sexuality that can again be understood in functional terms. (This explains why Freud in the just quoted statement can link the genital drive to “its object” and “the object’s attractions” when arguing that the sexual drive is in fact independent of an object.)

Freud’s new radical starting point for the theory of sexuality had explosive potential within the psychoanalytic movement. This would be revealed at a meeting of the Wednesday Night Psychoanalytic Society in 1911 when Sabina Spielrein again defined the sexual drive as the “reproduction drive” with an inherent object (partner of the opposite sex)

and aim (coitus) that "must" be used appropriately. "What troubles me most," Freud remarked, "is that Miss Spielrein wants to subordinate the psychological material to biological criteria."[24] Freud recognized the return of the old psychiatric style of reasoning within his own psychoanalytic movement. Spielrein allied herself with the functional view of sexuality, and she was not the only one. Carl Gustav Jung officially approved of this position a year later when, in his critique of Freud's views on infantile sexuality, he proposed to define sexuality as the instinct for the preservation of the species or, in slightly different words, to regard normal sexuality as the manifestation of an original reproduction instinct and consequently to evaluate perversions as deviations from the normal development of sexuality.[25] This implicit return to the style of reasoning of Freud's predecessors had a huge impact on the psychoanalytic movement and on Freud's thought in particular. The 1915 edition of *Three Essays*—the edition in which he added long passages on the theory of the drives, the libido theory (narcissism and object-love), and infantile sexuality (oedipal thematic, object-choice, developmental approach)—can be read as part of Freud's response to Jung.[26] But these newly added passages were hardly a defense of the 1905 theory of sexuality. The new passages in fact show that Freud dramatically changes his conceptualization of sexuality, and beyond this the whole character of psychoanalytic theory, at the moment he starts to rethink the nature of the sexual drives in relation to objects.

Perversion, the Need of Variation, and Reaction Formations

Having discussed the deviations in relation to the sexual object, Freud turns his attention to sexual aims. His thoughts on this issue parallel his reasoning on the sexual object. Whereas Krafft-Ebing et al. represented the popular view in which coitus was seen as the normal sexual aim and all other sexual activities were regarded as perversions, Freud immediately states that these so-called perverse activities can actually be recognized as present in all normal sexual activities. According to Freud, the observation of sexual activities and relationships shows that the sexual aim is hardly ever limited to the genitals, but involves the whole body as a surface of

excitation and pleasure. It is not without irony and a sense of provocation that he raises the question whether kissing (which he defines as the contact between the mucous membrane of the lips that constitute the entrance to the digestive tract) should be classified as a perverse act, even though it is generally regarded as an aspect of every normal sexual relationship, and therefore held in great esteem in civilized societies.[27] After all, like oral-genital activities, anal-genital activities, fetishism, sadomasochism, voyeurism, and exhibitionism, kissing involves body parts that do not belong to the sexual apparatus *sensu strictu*. He adds that the various sexual activities express a certain general human "need for variation"—a remark deleted from the 1920 edition onward.[28] Such a need for variation collides with cultural conventions on normal and abnormal sexual activities. These conventions manifest themselves as disgust for certain sexual activities. Freud seems to suggest here that disgust is an expression of cultural morality, but he actually argues that this is not the case. Drawing upon his studies of hysteria, he writes that shame and disgust are to be regarded as reaction formations. These reaction formations are psychic counter-forces that are spontaneously constructed in order to repress the unpleasure that somehow results from sexual excitation. The crucial point here is that shame and disgust are seen as the "organically determined" limitations of the sexual drive, limitations reached without the involvement of external objects, norms, and principles. In 1906, Freud writes that his views on "organic sexual repression" were a crucial aspect of his theory of sexuality, which held that the essence of sexuality could be described in terms of pure physiological processes.[29] An element of these physiological processes is organic repression, or reaction formations. Shame and disgust are therefore not the earliest manifestations of internalized cultural morality. The relation between the two is actually the other way around: cultural morality can only follow and impress "somewhat more clearly and deeply" the psychic lines "which have already been laid down organically."[30] The 1905 edition of *Three Essays* was not the first time Freud had articulated this idea. As early as January 1896 he had written to Wilhelm Fliess that shame and disgust could not be explained as expressions of an interiorized cultural morality, because clinical experience had shown that disgust could be overcome when the libido was strong enough to pursue its aims despite cultural norms. He deduced from this that there must be an independent source for the release

of unpleasure, a source which makes the experience of disgust possible and empowers morality.[31] In November 1897 he returned to this issue, arguing that the search for the source of normal sexual repression had led him to conclude that "something organic played a part in repression"—an idea he had found in one of Moll's writings.[32] Exploring this idea, Freud argued that infantile sexuality was not yet organized through genital primacy, but involved all erogenous zones and maybe even the whole body surface as sources of pleasurable sensations. In due time (puberty) and for some as yet unknown reason, the nongenital erogenous zones no longer produce sexual excitement, but unpleasure manifesting itself in disgust and shame. Although Freud could not deliver the answers to all the open questions on infantile sexuality, unpleasure, and repression, it was clear that repression could be thought of without references to external influences, hence, without reference to interiorized cultural morality. Infantile experience of pleasure and the later repression of the memories of these pleasurable experiences should be understood in terms of organic (biological) processes and subsequent psychic formations. It is such formations that provide the basic patterns and outline for the later internalization of cultural morality. Conversely, cultural morality will always be structured according to the psychic patterns that result from organic processes. Cultural morality follows organic processes, not the other way around.

According to Freud, disgust determines the identification of a certain sexual aim as perverse.[33] From the perspective of organic processes, this claim can be read according to the argumentation we have just described: disgust is an organically determined limitation of the sexual impulse ("Eek, dirty!"). This disgust is the psychic dam later strengthened by a culture's moral views. From the perspective of cultural morality, the qualification "perverse" is only a matter of consensus, that is, a nominal issue, because there is no natural norm for distinguishing between normal and abnormal sexual aims ("That dirty … is perverse!"). The perversions can therefore only be defined in relation to what adults generally consider normal. Freud writes that certain perverse acts (licking shit or sexually abusing dead bodies) are so detached from normal sexual behavior that one should categorize them as pathological in contrast to normality.[34] Such detachment from normality is in fact the main criterion for

identifying certain acts as perverse. But more importantly, he stresses that most perverse sexual activities are part of normal sexual behavior—remember what we said about kissing—or can be found in persons who lead a perfectly normal life in all other respects. In fact, clinical evidence shows that most perversions are a composition of "pathological" and "normal" sexual aims. The main conclusion from this discussion of the variety of sexual acts is that the sexual drive is most likely put together from various components.[35] If the sexual activities are composites, maybe the source from which they spring (the sexual drive) is also something composite. It is from this conclusion that Freud makes the step toward a theory of the perverse polymorphous nature of infantile sexuality, the partial drives, and the erogenous zones. The ultimate conclusion to be drawn from Freud's views on the perverse polymorphous nature of infantile sexuality is already foreshadowed in his elaborations on the sexual aim: strictly speaking, there are no perversions, since what we used to call perversions are in fact merely sexual activities in continuity with (through exclusiveness and fixation) the sexual disposition original to all human beings. The adjective "polymorphous" underscores the idea that infantile sexuality is not structured by any innate principle or order.[36]

Before we proceed to comment on the rest of the first essay, let us add two short remarks on sadism and masochism. In his discussion of the sexual aim, Freud is clearly guided by Krafft-Ebing's categorization of the perversions, which were authoritative in the field.[37] In the context of *Three Essays*, however, these two perversions are problematic, as they introduce two aspects of psychic life—aggression and pain—that are difficult to relate to infantile sexuality.[38] As regards pain (and the experience of pleasure in pain), Freud writes that we should understand pain as a reaction formation, analogous to shame and disgust. Nevertheless, it is difficult to see how pain could be a psychic counter-force, and, indeed, Freud does not and cannot explain his statement.[39] Later in the text he will mention compassion as a reaction formation against the pleasure of causing an object pain,[40] but of course this second statement does not answer the question of how pain can be a counter-force. Aggression and cruelty are equally difficult to understand. As we will see below, Freud will define infantile sexuality as the experience of pleasure through erogenous zones (corporeal excitation), drawing upon, for

example, Moll's contrectation impulse, the inclination to gently approach, touch, and kiss an object. From this perspective, it is difficult to imagine aggression and cruelty as being "sexual" (pleasurable), or as components of the sexual drive. In other words, there is the question of (1) the origin of aggressive and cruel impulses, and (2) the relation between aggression and sexuality. Freud will argue that aggression and cruelty originate from a source other than the erogenous zones. The alliance between aggression/cruelty and sexual life is established relatively late in childhood.[41] But this observation does not answer the two central questions. Freud therefore concludes that the perversions of sadism and masochism remain unsolved mysteries, and that the study of obsessional neurosis is most likely the key to understanding the sadistic component of the libido.[42] This is one of the reasons why Freud will turn his attention from hysteria to obsessional neurosis in the years after the first edition of the *Three Essays*. In 1905, however, Freud's theory of sexuality is mainly formulated from the perspective of hysteria (more precisely, conversion hysteria). This brings us to Freud's discussion of the sexual drive in the psychoneuroses.

Hysteria as a Model for Understanding Sexuality

Freud subsequently turns his attention to the psychoneuroses in general and to hysteria in particular. He explains that hysteria provides the main model for the further conceptualization of sexuality.[43] We wish to highlight two important developments that led Freud to take hysteria as the model for the study of human sexuality. From the *Studies in Hysteria* in 1895 to the Dora case in 1905, Freud's clinical work had been mainly concerned with hysteria. Although his views on it had changed over the years, he had always remained true to an observation Charcot had already communicated to him in the early 1880s: hysteria always involves the problematic of sexuality.[44] In his psychoanalytic practice, Freud had discovered that the origin of hysteria could be found in early childhood sexual experiences that had later been repressed from consciousness. The first major theory on the etiology of hysteria—the seduction theory (discussed further below)—was formulated in line with the general approach (the "popular opinion") that regarded neuroses as a deviation

from “normality” because they originated from an “abnormal” (traumatic) moment in early childhood. When Freud started to question these accidental influences, he fell back on the most common interpretative scheme, namely the influence of constitutional and hereditary factors. Nevertheless, there is a major difference between Freud and his predecessors, which can be seen in his 1906 claim that “in my theory the ‘sexual constitution’ took the place of a ‘general neuropathic disposition.’”[45] And in *Three Essays* he writes: “The conclusion now presents itself to us that there is indeed something innate lying at the basis of the perversions but that it is *something innate in all human beings*, though as a disposition it may vary in its intensity and may lie dormant, waiting to be brought to the fore by life experiences.”[46] In other words, Freud wants to explain hysteria or perversion as resulting not from an abnormal neuropathic disposition, but from a general human sexual disposition.[47] The key questions in the study of hysteria were thus no longer “What is the specific accidental moment in the etiology of hysteria?” or “What is the neuropathic constitution from which we can explain hysteria?” but “How does hysteria originate from the general human sexual disposition?” and “What is sexuality?”

Freud’s views on organic repression had played a key role in this change of perspective: (infantile) sexuality and repression could be explained in terms of general human physiological processes. The study of hysteria was apparently impossible without reference to a general human sexual constitution. Conversely, it could no longer be argued that the analysis of the psychopathologies should be limited to the field of pathology alone.[48] A redefinition of the relation between pathology and normality was required, and Freud provided one, arguing, in keeping with a line of thought we have already identified in the clinical studies of Krafft-Ebing et al., that pathologies can be seen as exaggerations and intensifications of normal sexual impulses and acts. In hysteria, we find constitutionally higher than average sexual energy, and subsequently we find repression of sexual impulses “in excess of the normal measure.”[49] Hysteria magnifies the general human physiological processes of sexuality, its repression, and the symptom formations that result from the unresolved conflict between the sexual impulses and repression.

Freud now takes a further important step: human life can best be studied from the perspective of a certain group of pathologies (namely the psychoneuroses), because these pathologies display exaggerations of normal physiological and psychic processes and mechanisms, and are not as estranged from normality as some other pathologies. If we are all to a certain extent hysterical, then hysteria can inform us about who we are. The study of pathology becomes what we call the pathoanalysis of human existence. Human nature as such can best and probably only be studied from the perspective of the psychopathological variations. In the 1905 *Three Essays*, hysteria is the variation that becomes the model for understanding all human sexuality and, beyond that, human nature.[50]

In principle, this perspective on the pathological variations allows Freud to break away from the categorical approach that characterizes traditional and mainstream psychiatry. In the categorical approach, which interprets psychiatric taxa much as Linnaeus orders plants in his *Species Plantarum*, one either belongs to a certain category or not, and there are no dynamic relations between the categories—after all, a category is defined in terms of the features of a species that are distinctive. Most psychiatric textbooks, from Kraepelin's *Lehrbuch* to the American Psychiatric Association's *Diagnostic and Statistical Manual* that is its legitimate heir, consider patients, at least in principle, to belong to one particular pathology with distinctive features (symptoms), without the possibility of any dynamic relation between these pathologies. Things are, at least potentially, completely different with Freud. Since the different psychopathologies reveal universal human tendencies, they can (and should) in principle also be considered in dynamic relation to one another. Freud does not develop this insight in great detail, but his famous saying that neurosis is the negative of perversion is a perfect illustration of such a dynamic and internal relation.

Sexuality and/as Pleasure

What, then, is sexuality when its model is hysteria? What aspects of human existence can be highlighted via the study of hysteria? In order to answer such questions, Freud first relates hysteria to the perversions by arguing that the hysterical symptoms are nothing but the converted expressions of the drives that can be described as "perverse" by nature.

Based on his analysis of the sexual objects and aims, which dismisses a functional interpretation of the drives, Freud deduces that the sexual drive consists of an amalgam of components manifesting itself in a variety of "perverse" objects and aims. It is the nonfunctional, non-normative interpretation of sexuality that makes it possible to name the "normal" sexual drive "perverse," and it is the study of hysteria that substantiates this claim. Hysteria highlights the same psychic processes and mechanisms that we find in normal human existence, and the hysteric symptoms are expressions of the perverse nature of the sexual drive. Freud's dictum that neurosis is the negative of perversion can thus be read as follows: perversion is "positive" in the sense that the term "perverse" describes, firstly, the nature of the sexual drives, and secondly, the direct and concrete manifestation of these drives in fantasy or acts; the psychoneuroses result from the excessive degree of repression of the sexual drives.[51] In hysteria we can thus witness the manifestation of the perverse nature of sexuality, that is, those so-called aberrations that we recognize as variations of so-called normal sexuality.[52]

According to Freud, the hysterical constitution highlights three central aspects of sexuality.[53] Firstly, there is the bisexual disposition. Freud credits Wilhelm Fliess for his innovative work on this issue.[54] Indeed, bisexuality had long been a topic of Fliess's biological theories, but it was Freud's own clinical findings in the study of hysteria that had shown that (non-anatomical) bisexuality is constitutive of hysteria. Notably the Dora case had further substantiated the hysteric's random switching between male and female roles and male and female objects. A few years earlier, Freud had already concluded from this that there were always four individuals involved in every sexual act: the male/female subject orientation and the male/female object.[55] In spite of this, and of the fact that he originally intended to give his text on the theory of sexuality the title *Die menschliche Bisexualität*,[56] Freud does not provide a comprehensive theory of bisexuality in *Three Essays*. The second aspect of sexuality entails the "tendencies to every kind of anatomical extension of sexual activity," which one finds in hysteria more often and more intensely in comparison with normal sexuality.[57] Freud is referring here to another observation from his clinical experience with hysterical patients: their symptom formations always pointed at an inclination toward the oral or

anal erogenous zones that produced pleasure in early childhood and were then repressed through disgust and shame. These inclinations registered that the (partial) sexual drives—oral and anal drives, but also perverse opposite tendencies, such as exhibitionism and voyeurism—were still exerting pressure, though they now produced only unpleasure.[58] Eating disorders or feelings of suffocation, for instance, were the typical symptoms that could be traced back to oral sexual pleasure and disgust.[59] Thirdly and relatedly, Freud developed the idea that human sexuality has to overcome its initial mixing with excremental functions. In *Three Essays*, Freud only mentions this idea in passing,[60] but he develops it in much greater detail in his text on Dora. There he writes: "The Early Christian Father's '*inter urinas et faeces nascimur*' clings to sexual life and cannot be detached from it in spite of every effort at idealization."[61] The separation of sexuality from the excremental functions can, according to Freud, only be realized through the introduction of the typically human affects of disgust and shame (and guilt), and through a complex process of idealization. More specifically, the hysterical problematic is characterized by the imminent and insurmountable threat of a contamination of the sexual by the excremental.

These three aspects of the hysterical constitution confirm what Freud had already hinted at: what we call the sexual drive is actually a composition or bundle of partial drives.[62] In the 1915 edition of *Three Essays*, Freud will insert a passage on the theory of the drives summarizing a few basic notions from "Instincts and Their Vicissitudes" (also published in 1915). In that passage, he will argue that the sexual partial drives in fact originate from one of the two forms of excitation of the organs. Freud is referring here to what he calls the two primal drives, namely the drives of self-preservation (ego drives) and the sexual drive, which are first aimed at organ-pleasure before entering the service of the reproduction function. It is only then that the sexual drive becomes recognizable as such and reveals its actual purpose and content: the production of new individuals.[63] With the appearance in 1915 of this strong version of the drive dichotomy, a functional approach enters the text, linking Freud's new interpretation of the primal drives to the body of thought he had so explicitly dismissed in 1905 as an inaccurate fable.

But what does Freud tell us in 1905? When discussing the partial drives he writes that they are susceptible to further analysis. He then writes a few sentences that were deleted from the 1915 edition onward:

> In addition to a "drive," which is not itself sexual and which has its source in motor impulses, we can discern in the partial drives a contribution from an organ receiving stimuli (e.g., the skin, the mucous membrane, or a sense organ). An organ of this kind will be described in this connection as an "erogenous zone"—as being the organ whose excitation lends the drive a sexual character.[64]

The passage can be read in (at least) two ways. The first reading would argue that there is *one* primal drive that may become sexual through the erogenous zones. The idea would then be that Freud proposes one primal drive that is differentiated into various domains and functions, of which the sexual function is one. The second reading of the passage would argue that there is *some* impulse that we can first identify as a sexual drive through its link with the erogenous zones. In 1905, while distancing himself from the perspective of his predecessors who gave a strictly functional interpretation of the genital/sexual instinct (preservation of the species), Freud was still uncertain about the exact nature and status of the drives.[65] But this did not prevent him from maintaining the Darwinian idea that psychic life is characterized by two—and only two[66]—fundamental tendencies: sexuality and self-preservation (drive for food intake). In the famous passage on sensual sucking (discussed below), Freud distinguishes between sexual pleasure and satisfaction on the one hand and the need for taking nourishment on the other. He does not speak there of a nutrition drive (or instinct for self-preservation), but he does distinguish between the sexual and the nonsexual, associating the latter with hunger and the need for nutrition. Since sensual sucking seems completely independent from the need for nutrition, according to Freud, we have no choice but to consider it sexual.

The excitation of bodily zones such as the skin or mucous membranes determines the sexual character of the drive. The question now arises as to what Freud means by "sexual" when it is defined relative to the excitation of zones and organs. In the second essay, Freud addresses the question of the origin and nature of sexuality in a section on the autoerotic

manifestations of infantile sexuality. The starting point and model for his discussion of these manifestations is the phenomenon of sensual sucking (*Lutschen* or *Wonnesaugen*), a rhythmic oral activity (often combined with tugging some sensitive part of the body) that he describes as a sexual activity. Why and in what sense is sensual sucking sexual? Freud observes that sensual sucking "absorbs all attention, making the child either fall asleep or experience a motor reaction in a kind of orgasm."[67] This hardly seems to answer our question. Freud's main argument is that this pleasure is sexual because it is essentially autoerotic and nonfunctional.[68] It has nothing to do with food intake and hence it is not related to self-preservation, the need for food, or the satisfaction of hunger. Freud here mainly applies his basic Darwinian scheme that whatever is not related to self-preservation is *for that very reason* sexual.[69]

It was Havelock Ellis (1859–1939) who first coined the term "autoerotism." He had described it as "a spontaneous sexual emotion generated in the absence of an external stimulus proceeding, directly or indirectly, from another person."[70] The typical forms of autoerotism, found almost exclusively in puberty and adult life, were sexual orgasm during sleep, erotic daydreams, and masturbation, as well as the experience of sexual stimulation through the vibratory motion of machines and vehicles. According to Ellis, these autoerotic manifestations were mostly accompanied by sexual fantasies about absent other persons. Freud moves beyond Ellis's conception of autoerotism when he uses it to describe the infantile experience of sexual pleasure; moreover, he defines autoeroticism more radically than Ellis as being strictly without object. For Freud, autoerotism as we find it in early infancy is not about sexual fantasies, since fantasy always implies an object (as discussed below).[71] It is nothing but a physical-pleasurable activity originating from the "drive" and the excitability of erogenous zones. Nevertheless, Freud says that there is a primal activity that triggers sensual sucking, and this activity is breast-sucking. At first sight, it might appear as if sensual sucking therefore does depend on the presence or absence of an object, but strictly speaking, this is not the case. The breast, or one of its surrogates such as a milk bottle, is only a thing by means of which the infant discovers that sucking is pleasurable.[72] More concretely, while sucking at the mother's breast, the lips of the infant behave as an erogenous zone and the warm

milk creates a pleasurable excitation that the infant will later try to reproduce.[73] This implies that the infant's relation to the breast—or attachment to the object providing the milk—is not essential to sexuality. Freud's reference to Moll's theory of sexuality in this context is telling: infantile sexuality (sexual pleasure) cannot be reduced to biological functions (detumescence drive) or to loving attachment (contrectation drive). Breasts or bottles are mere instruments in the discovery of autoerotic pleasure. The objects of sensual sucking and tugging are not substitute objects for a supposedly absent first object. The paradigm for infantile sexuality, Freud writes, is the lips kissing themselves.[74]

Nonetheless, Freud is not as clear on this topic as it would at first seem. Further on in the text, when Freud discusses the transformations of puberty, he writes that while sexual satisfaction was still linked to ingestion, the sexual drive had a sexual object outside of the body, namely the mother's breast, and it is for this reason, Freud adds, that breast-sucking is the model for all later object relations—and, conversely, every later "finding of an object" (*Objektfindung*) is nothing but "re-finding an object" (*Wiederfindung*).[75] This statement only seemingly contradicts what we said about the autoerotic character of infantile sexuality.[76] We know already that it is not so much the breast but the warm milk that creates the pleasurable excitation the child is actively looking for. More generally, sexuality gets directed toward an object as such only at the beginning of puberty.[77] Once this is the case, the erogenous zones are re-invested from the perspective of adult object-related sexuality. The breast can now acquire a meaning that it could not have had before. Hence, it is only retrospectively, in puberty, that breast-sucking attains paradigmatic value.

The idea that finding the object is inevitably re-finding it has been very influential in the history of psychoanalytic thinking. In particular, the idea of an irreducible distance or difference between the object we find and the object we have lost has been used to defend the idea that the drive and desire in Freud originate in negativity,[78] and that it is precisely this structural difference that would be the motor of psychic life. According to Freud, however, what we lost is not so much an object but a specific regime of autoerotic pleasure. More importantly, Freud does not deduce from this state of affairs that negativity plays a central role in psychic life.

On the contrary, the drive is a force that literally drives the human being forward and that seeks a release of tension. In Freud, therefore, the drive should not be understood as negativity.

One should not deduce from the fact that infantile sexuality is essentially autoerotic and should be described in physiological terms that fantasies do not play an essential role in pathogenesis. In "My Views on the Part Played by Sexuality in the Aetiology of the Neuroses" (1906), Freud writes that in the years before *Three Essays* was published, he became progressively aware not only of the importance of a sexual constitution and of hereditary factors, but also of the role fantasies play in the creation of neurotic symptoms. Freud's text on the Dora case, which was published in the same year as *Three Essays* and which serves as its clinical counterpart, can help us to better understand Freud's thinking here. Indeed, in this text Freud links Dora's symptomatic cough to a fantasy of fellatio that she finds repulsive and therefore represses. However, Freud is very clear about the fact that this fantasy is created during puberty. Mr. K's declaration of his love for Dora during a trip to the lake when she is sixteen years old reminds her of an earlier seduction by the same Mr. K. On the previous occasion, he had tried to embrace and kiss her in his grocery shop, and she felt, at that moment, his erect penis against her body. The unpleasurable affect that accompanies this feeling is displaced: "Dora was overcome by the unpleasurable feeling that is proper to the tract of the mucous membrane at the entrance of the alimentary canal—that is by disgust."[79] Freud links this displacement from the genital to the oral zone to the fact that as a child Dora was an enthusiastic thumb-sucker and that this disposed the oral zone to playing a crucial role in her adult life. In Dora's sexuality the oral zone (and its repression) plays a predominant role.[80] The displacement of the affective rejection of Mr. K's aggressive advances from the genital to the oral zone clearly testifies to this. It also illustrates what Freud means when he writes that the erogenous zones are identical to the hysterogenic zones and that they show the same characteristics.[81]

It is this first scene and the unpleasant affect that goes along with it that is reactivated through Mr. K's declaration of love at the lake. At the moment of the first trauma, Dora had not yet entered puberty and for that reason could not link this event to concrete sexual representations, but now she is in puberty and knows that parts of the body other than the

genitals can be used for sexual gratification and sexual intercourse.[82] At that stage of her life, Dora was very preoccupied with the relationship between her father and Frau K, and she actively participated in it in many ways. It comes as no surprise, then, "that with her spasmodic cough, which, as is usual, was referred for its exciting stimulus to a tickling in her throat, she pictured to herself a scene of sexual gratification *per os* between the two people whose love-affair occupied her mind so incessantly."[83] It is this fantasy that is expressed in the spasmodic cough, which is one of Dora's most characteristic symptoms. Once again, we see that it is only at the beginning of puberty that sexuality receives an object and becomes fantasmatic; hence only from puberty onward will fantasies play a role in pathogenesis.

We recognize here the structure of "deferred action" (*Nachträglichkeit*) that Freud had developed earlier in his work, and more particularly in "Project for a Scientific Psychology" in 1895 and *The Interpretation of Dreams* in 1900.[84] This deferred action cannot be understood apart from the crucial role puberty plays in the development of the human being. In his "Project," for instance, Freud explains how Emma is seduced by a shopkeeper who touches her genitals through her clothing.[85] At first, this event remains without real consequences, Freud continues, because at that time Emma is not yet capable of understanding the sexual nature of the shopkeeper's advances. It is only at a later time—at the beginning of puberty—that things change dramatically. When Emma enters a clothing shop, the original scene threatens to become conscious again. But Emma is in puberty now and immediately grasps the sexual meaning of the original scene. She runs away in terror and develops a phobia for this type of shop. Of course, in 1895 Freud does not yet have a concept of infantile sexuality, but we already find here the idea that a first event receives a completely new meaning when it is remembered in a second moment after puberty has begun.

Seduction, Trauma, and Disposition

The Dora case allows us to examine another point of great importance for properly understanding the first edition of *Three Essays*. In the beginning of his account, Freud states that the psychic conditions for hysteria that he

and Breuer had described in their *Studies on Hysteria*—psychic trauma, conflict between the affects, and a disturbance in the sphere of sexuality—are also present in the Dora case.[86] This statement seems to contradict the most classical historiographical interpretation of Freudian thinking. This historiography wants us to believe that in 1897 Freud gave up his seduction theory of psychopathology in general and hysteria in particular—"I no longer believe in my neurotica"[87]—and that from then on he understood the traumatic stories of his patients as distorted expressions of oedipal fantasies.[88] How then are we to explain the complete absence of references to the Oedipus complex in both the Dora case and the first edition of *Three Essays*? All references to this complex were introduced in later editions, especially in the footnotes to the edition of 1920. It is clear that there are very good reasons to closely examine the passages in *Three Essays* where Freud is speaking of trauma, seduction, and their relation to the neuroses.

Freud summarizes the evolution of his views on the etiological significance of sexual trauma for neuroses as follows:

> I cannot admit that I overestimated its frequency or significance in my 1896 paper on "The Aetiology of Hysteria," though I did not then know that persons who remained normal might have had the same experiences in their childhood, and therefore placed more emphasis on the significance of seduction than on the factors of sexual constitution and development.

He further adds, "Obviously seduction is not required for the awakening of the child's sexual life; such awakening can also come about spontaneously as a result of internal causes."[89] Freud's disbelief in his "neurotica" did not mean that he would henceforth think that the traumata about which patients told him were imaginings in need of an (oedipal?) explanation; nor did it mean that he would refuse to accept the frequent occurrence of sexual seduction between adults and children (or between children). The statement that he did not overestimate the frequency of seduction in "The Aetiology of Hysteria" also relativizes the idea that Freud gave up his traumatic theory of neurosis because he could not admit that there were as many perverted adults and fathers as his theory presupposed. Things clearly are much more complex than is sometimes admitted.[90]

The term “neurotica,” a substantivized adjective in the nominative plural of the neuter gender (or, to be precise, the accusative plural in Freud’s original formulation of this statement), refers to Freud’s “theory of the neuroses.” Freud here addresses his theory of the traumatic origin of psychopathology. It is this theory, and not the traumatic stories of his patients, that he no longer believes. In other words, Freud questions the etiological significance of traumata and not their truth-value. Indeed, *Three Essays* thematizes the disposition that is at the basis of hysteria. It explains how the hereditary or acquired exaggeration of some of the characteristics of this disposition leads to the development of hysterical symptoms. Seduction is traumatic for Freud because it confronts the child with a sexual object at a time when it is physiologically not yet ready for it. In other words, seduction does not respect the autoerotic character of infantile sexuality. This explains why sexual traumata can have all kinds of devastating effects, but Freud no longer considers these traumata to be a necessary cause for the genesis of hysterical pathology. Nor do they, in most cases, constitute sufficient causes. Here we can think once again of the Dora case. Dora’s history is structured around two traumatic events. Freud at no point questions the truth-value of these two events. He just takes them for granted. But these events alone cannot explain Dora’s hysteria. Quite the contrary, they become extremely meaningful and acquire a traumatic character only because of Dora’s hysterical disposition. Hence, according to Freud, Dora’s reaction at the moment that Mr. K embraces her in his grocery shop also testifies to “the contradictory enigma of hysteria through identifying the pair of opposites [characteristic of hysteria] of a sexual rejection taken too far on the one hand, and an excessively felt sexual need, on the other.”[91] Aversion itself is linked to the contamination of the sexual with the excremental that we discussed earlier.[92] Dora’s traumata are not the cause of her hysteria, but they are the occasion by which her hysterical disposition is activated and can express itself. There is nothing strange then about Freud’s claim that his understanding of Dora’s pathology is an extension of his earlier work on hysteria and, more particularly, of his *Studies in Hysteria*. Indeed, in his study on Dora and in *Three Essays*, Freud recalibrates the meaning and the importance of sexual traumata in relation to a universal sexual disposition, but at no point does he repudiate their reality or deny their possible noxious effects.

Oedipal Relations and the Incest Barrier

At no point in the first edition of *Three Essays* does Freud take the infantile Oedipus complex as a possible explanation for psychopathology. Instead, as we have seen, he defends an organic or dispositional theory of neurosis in which trauma still plays a significant role. The absence of any reference to the Oedipus complex is not just a matter of fact.[93] At this point of Freud's intellectual development, an infantile Oedipus complex is a theoretical impossibility. The Oedipus complex primarily consists of the positive and negative sexual ties toward the child's parents. It presupposes, therefore, that infantile sexuality has become objectal and is no longer strictly autoerotic—a transformation that does not happen until the beginning of puberty.[94] It follows that the oedipal themes that we find in culture and that Freud discovers in the stories of his patients are characteristic of puberty. The parents are likely to be the first (fantasmatic) objects of the libido, but the investment in these objects occurs at a moment after the latency period when the incest barrier has been put in place.[95] Freud states that the incest barrier is—in contradistinction to the reaction formations—a cultural demand of society that forces young people to direct their sexual interests outside of the family, in order to help establish higher social units.[96]

But how then are we to understand the references to Oedipus in Freud's earlier work? In *The Interpretation of Dreams* and "Fragment of an Analysis of a Case of Hysteria," he calls the Oedipus legend a poetical elaboration of the typical relation of children to their parents.[97] We can still be moved by Sophocles' tragedy because it reminds us of an important aspect of our own childhood relation with our parents. But this does not imply that in these early texts Freud understands the neuroses from the perspective of a psychological Oedipus complex that would explain their nuclear structure. In the study on Dora, for instance, he explicitly writes that Dora's infantile relation to her father is summoned up in puberty to protect her from her love for Mr. K. An old love is reactivated to protect her from an actual love. One can hardly call this interpretation oedipal in the classical sense of the word, since such an interpretation would understand the actual love for Mr. K as a disguised repetition of the old (oedipal) one for the father and not the other way around.[98] In Freud's early work, King Oedipus can more plausibly be seen

to function as an “archetype” for the modern (neurotic) subject. The figure of King Oedipus has an emblematic value for our tragic destiny.[99] But this reference is still far removed from the idea of a psychological complex that structures the development of the human psyche in the infantile period and that regulates our progressive inscription in the world of culture. It is only when Freud gives up the strict dichotomy between infantile (autoerotic) sexuality and pubertal objectal sexuality in the years following his study on infantile sexual researches and theories,[100] and the case study of Little Hans and the boy’s first sexual object-choices,[101] that such a psychological complex and its place in the developmental process becomes theoretically conceivable.[102] Similarly, it is only when the genesis and the status of the object become an explicit problematic issue for Freud that the Oedipus complex can and will acquire a structural role in the development of the psyche.[103]

The Problem of Object Relations

All of this does not prevent Freud from remaining quite ambiguous when describing the status of objects and object relations in early infancy. He writes that even at the moment when sexual activity proper separates from ingestion and becomes autoerotic, an important part of sexual relations remains present in the relation with the persons who take care of the vital needs of the infant: “Throughout the entire period of latency, the child learns to love other people who help it in its helplessness and satisfy its needs—a love on the model and in continuation of the relationship of the infant to its nursing caregivers.”[104] Freud is speaking here about the tender feelings (*Zärtlichkeit*) of the child for its caregivers. The problem we are confronted with is a familiar one: since Freud mentions only two fundamental tendencies that govern the human psyche—a sexual drive and the need for nutrition (drive for food intake)—all relations to the surrounding world have to be explained in terms of either one or the other. Nevertheless, it is very hard to situate tenderness within this dichotomy: it cannot be reduced to the vital needs of hunger and thirst, nor is it merely sexual. Freud solves this problem by linking tenderness to inhibited sexuality. Tenderness is essentially a modus of sexuality. It is sexuality that is inhibited with regard to its aim (“attenuated libido”).[105] In other

words, Freud explains all relations to objects (persons) in terms of libidinal ties, not in terms of self-preservation.

What is missing here is a theory of attachment that would allow Freud not only to give tenderness a status of its own that cannot be reduced to sexuality, but also to understand it as an original and fundamental dimension of human existence that does not require an explanation in terms of a specific individual's life (such as the experience of being cared for). Indeed, Freud's assumption that children are interested in the presence of their mother because they are biologically dependent on her lacks empirical proof. We find similar attachment behavior in other primates, even if they do not have as long a period of dependency on the mother as humans do.[106] Attachment behavior is rooted in evolution. It can be understood on evolutionary grounds and in terms of evolutionary benefits. It is, in other words, a primary drive that belongs to our very nature and does not need an explanation at the level of the individual.[107] Would it not be rather remarkable that a whole series of behaviors and feelings occurring in most mammals would have to be explained for humans in a fashion completely different than for animals? Furthermore, children may also be attached to persons who are not at all occupied with the satisfaction of their needs (and sometimes quite the opposite). Whatever the case may be, Freud thinks that the sexual drive finds an object at the beginning of puberty by following the pathways that have been traced by the tender relationships toward the caregivers, primarily the parents. He writes: "Certainly the most natural thing for the child to do would be to choose as sexual objects the very persons whom it has loved since childhood with what may be called attenuated libido."[108]

It is not only the distinction between food intake and sexual drives that causes problems for Freud, or that at least needs to be put in perspective. Freud links the partial drives to the different erogenous zones that he discovered through the study of the perversions. He takes the oral drive as a paradigm for the study of these zones.[109] This allows him to characterize infantile sexuality as essentially autoerotic, "without an object" and nonfantasmatical. But having linked the traumatic character of seduction to the fact that it introduces an object to the sexual drive at a moment when the young child is not physiologically ready for it, Freud must admit that infantile sexuality entails components that are from the outset

directed toward an external object.[110] Such components are the drives for watching and cruelty. At the same time, Freud is far from clear about the exact nature of these components. He writes, for instance, that despite their close link to sexuality, the drive for watching is initially independent of it. But this statement is immediately followed by another one in which Freud says not only that seduction can "sexualize," or better "pervert," the drive for watching from early on in life, but also that this sexualization—the pressing need to see, for instance, other people's genitalia—can occur as a spontaneous expression of infantile sexuality.[111] We find the same uncertainty with regard to the cruelty component of the sexual drive. Freud states that the cruel impulses find their origin in sources independent of sexuality but which from very early on become linked to it through anastomosis.[112] With regard to these uncertainties, we could accuse Freud of inconsistency, or we could appreciate the fact that he does not lock himself within one model and that he, on the contrary, tries to do justice to the phenomena that seem to contradict his original insights. This surely brings some imbalance into the text, but at the same time, it makes it possible to read it as the articulation of a problem or set of related problems, rather than as a set of answers that must be dogmatically accepted or rejected. Freud, remarkably enough, never tries to hide the problems that haunt his own system.[113]

It is worthwhile to examine one such moment in which Freud is confronted with the limits of his own paradigm. As discussed, according to Freud infantile sexuality is nothing but an organic inscription on the body (autoerotism). There is nothing dramatic about infantile sexuality. Freud compares it to tickles that one can experience in different parts of the body (the erogenous zones). But is this a tenable position? We also already know that the object—one thinks of the breast—does not play a significant role in this context. It can be instrumental in eliciting the excitement that the child wants to repeat, but at no point is it intended *as such* by the drives. Jean Laplanche famously calls such a view "ipsocentric."[114] This approach implies that infantile sexuality develops out of itself from an autoerotic to an objectal stage. The other plays no structural role in this development, except as a catalyst: she or he has no determining significance for the development that she or he sets in motion. But elsewhere in his text Freud introduces a new figure. It is no longer the

breast/milk that causes pleasure in spite of itself, but the mother that takes the child as "fully fledged sexual object." Freud writes: "A child's contact with its caregiver affords it an unending source of sexual excitation and satisfaction emanating from its erogenous zones. This is especially so since the caregiver—the mother, as a rule—herself bestows upon the child feelings derived from her own sexual life: she strokes it, kisses it, rocks it, and quite clearly treats it as a substitute for a fully fledged sexual object."[115] Freud interprets this state of affairs from his own ipsocentric and physiological perspective. He does not give any special weight or importance to the mother's sexuality, which seems clearly implied here. Instead, he again immediately reduces the role of the mother to awakening the child's sexuality through her tender activities. These activities, he adds, prepare the future intensity of the sexual drive: "She is only fulfilling her duty in teaching the child to love. After all, the child is meant to grow into a competent person with vigorous sexual needs, and to accomplish in life all the things that human beings are impelled to do by their drives."[116] Everything here is a matter of the right measure. We cannot do without a sufficient amount of tenderness, but too much tenderness—and excitation—prevents the child from learning that in matters of love, one cannot always have what one wants. Thus, Freud's argumentation first equates taking the child as "fully fledged sexual object" with tenderness, and then reduces the significance of tender feelings to eliciting the right amount of pleasurable (sexual) excitation. But is not initiating a tender, caring relationship with a child quite different from taking it as a "fully fledged sexual object"? It is especially difficult to reconcile Freud's exclusively "physiological" reasoning with his statement that the mother as a rule bestows upon the child feelings derived from her own sexual life, and quite clearly treats it as a substitute for a fully fledged sexual object. We already mentioned the problematic status of tenderness in Freud's text, but here things become even more complex: If the tender and caring relation with the child is essentially contaminated by adult sexual fantasies—and what else could taking the child as a "fully fledged sexual object" mean?—is it still possible to describe the effects of this relation in purely physiological terms? Does this contamination not imply that the child is confronted with the sexual (fantasmatical) life of the adult (and not just with a surplus of excitation) at a moment when it is not yet ready for it, and that this exceeds its

capacities? Jean Laplanche systematized this problematic under the heading of a "generalised seduction."[117] The adult unknowingly and unwillingly confronts the child with sexual messages to which it has to respond without having at its disposal the proper means—intellectually, affectively, or cognitively—to properly understand it. Hence, the efforts of translation that the child is forced to make are structurally incomplete. They inevitably leave a remainder that Laplanche identifies with the sexual unconscious. In Freud, infantile sexuality has nothing to do with the cognitive or emotional understanding of the other's or one's own motives, intentions, or fantasies. Freud thinks about infantile sexuality in purely physiological terms. Nevertheless, we find in his text elements—the seductive mother, the ambiguous status of the drive for watching—that indicate the limits of his model and that might lead us to thematize (infantile) sexuality in a direction other than his own.

Puberty and the Organization of Pleasure

Let us return once more to the text of *Three Essays*, specifically to the third essay, "The Transformations of Puberty." In the first edition of the text, Freud hardly mentions the developmental perspective that is so characteristic of both his own later works and most psychoanalytic theory. In 1905, Freud only distinguishes between two developmental "phases": infantile masturbation and its return at the age of three or four years. All emphasis is on the structural changes that occur at the beginning of puberty. We are already familiar with some of these structural changes. In general, the beginning of puberty marks the moment in which "the erogenous zones become subordinated to the primacy of the genital zone."[118] During the infantile period, the genital zone functions like any other erogenous zone. In this period, the different partial drives seek pleasure independently of one another. It is only at the beginning of puberty that the genital zone becomes predominant. Freud is unclear about how we should understand this change and how it comes about. It primarily means that orgasmic pleasure—Freud calls it "end-pleasure"—can bring a halt to the preliminary pleasures that we experience at the different erogenous zones. What does this mean?

We should remember in this context that the link between the drive and its objects is essentially contingent. The reference to "fore-pleasure" and

"end-pleasure" in a certain sense strengthens this sense of contingency.[119] As long as the difference between the genital zone and the other erogenous zones is exclusively thematized as a difference between two types of *pleasure*, Freud is not obliged to postulate an essential relation between the drive and a *specific* object. Both a homo- and a heterosexual object, for instance, can be involved in the production of "end-pleasure." From the perspective of pleasure, the nature of the object is irrelevant. This would be consistent with Freud's earlier statements on the status of the object, and it would allow him to continue the deconstruction of the relation between "normality" and pathology that he had begun in the two previous chapters of his text. Yet this is not what Freud does. On the contrary, he immediately links the notion of "end-pleasure," which belongs to the genital zone and genitality, to the idea of a heterosexual object-choice.[120] Freud suddenly seems to think that in principle the possibility of "end-pleasure" goes together or should go together with the choice of a heterosexual object. Nothing in his text obliged him to give a privileged theoretical status to this choice. Indeed, his whole argumentation up to this point should have prevented him from doing so. In this way, Freud reintroduces the functionalist approach that characterized the psychiatric style of reasoning that we discussed earlier.[121]

How do the different erogenous zones enter into the new structure that is dominated by the genital zone? According to Freud, they deliver the fore-pleasure that makes the orgasmic pleasure possible.[122] More concretely, they show the drive the way toward its fundamental aim: orgasm and (in the case of the male subject) the ejaculation that goes along with it.[123] Freud identifies pleasure fundamentally with a release of tension: an increase of tension is felt as unpleasure, a release of tension is felt as pleasure. What characterizes the preliminary pleasures is that they are paradoxically accompanied by an increase of sexual tension. It is precisely this increase in tension—that in principle is felt as unpleasure—that compels us to continue until we reach the final outcome of this process: orgasm. Indeed, it is only orgasm that allows for a complete release of tension. The primacy that the genital zone attains in puberty relates not to the type of object that causes pleasure, but to the fact that it allows for a different and more intense type of pleasure. The idea that in puberty pleasure is explicitly sought out in relation to an object—this is

what differentiates infantile sexuality from adult (pubertal) sexuality—does not imply that this object should in principle be a heterosexual one. Such a claim contradicts the general outline of Freud's argument.

But things are even more complex. Not only is it unclear why the object of the genital drive should be a heterosexual one, but following Freud's line of thinking, it is also unclear why we should give any privilege to the genital zone as such. Freud conceives the sexual drive in infancy as an amalgamation of components. The genital zone is one of these components, but it has no natural privilege. Affirming this privilege seems to reintroduce the identification of sexuality with the genital drive—even though it was this very identification Freud explicitly criticizes throughout the *Three Essays*. And yet this identification is implied in the following passage that we find in the summary of Freud's text, which is meant to explain the origin of the perversions:

> Writers on the subject think, for instance, that the necessary precondition for a whole number of perverse fixations lies in an innate weakness of the sexual drive. In this form, this position seems to me untenable; it makes perfect sense, however, if what is meant is a constitutional weakness of one particular factor in the sexual drive, namely the genital zone—a zone which later takes over the function of combining the individual sexual activities for the purpose of reproduction. For if the genital zone is weak, this combination, which is required to take place at puberty, is bound to fail, and the strongest of the other components of sexuality will prevail in its activity as perversion.[124]

Freud thus links the different perversions with a weakness of "one particular factor in the sexual drive, namely the genital zone." When the preliminary pleasures become too strong (and the genital zone, in comparison, too weak) and the accompanying tension is not strong enough, the sexual process can come to a standstill, which is exactly what happens in perversion. Davidson notes for good reasons that this statement about the sexologists of Freud's day is quite astonishing. Freud criticizes them because they claim that the perversions are the effect of an innate weakness of the sexual drive and not of the genital component of this drive. But this is exactly what these sexologists always maintained and

had to maintain in light of their interpretation of the sexual drive as a genital drive and its reproductive function. It is Freud who cannot say what he says, given the argumentation he introduces in his text. The only thing Freud could have written while remaining consistent with his own thinking, Davidson concludes, is the following:

> For if the genital zone is weak, this combination which often takes place at puberty (instead of: "in der Pubertät *geforderte* …"), will fail, and the strongest of the other components of sexuality will continue its activity (instead of: "wird ihre Betätigung *als Perversion durchsetzen*").[125]

Freud not only struggles in this text with the limits of his own paradigm, but also with the paradigm itself. There are clearly instances in which it looks as if Freud does not want to accept the consequences of his own reasoning.

There is yet another crucial element to highlight here. The subordination of the different erogenous zones to the genital zone changes the way in which they function. We had indicated that in puberty, they are re-invested from the perspective of an adult sexuality that is essentially object-related. It is, as we know, only in this way that they can play a role in the sexual fantasies that are repressed in hysteria. But there is more at stake. Earlier, we discussed the idea that finding the object (in puberty) is essentially re-finding it, and in this context, we stressed the paradoxical logic according to which *re*-finding implies a distance or a difference between what is found and what was initially lost. Something similar is at work with the pleasure that we get from the different erogenous zones. In order to understand this, we have to look at the study on jokes that Freud published in the same year as the *Three Essays* and his study on Dora. Freud refers to this text when explaining the nature and functioning of preliminary pleasures.[126] What seems to interest him most here is the fact that we can laugh at our own jokes only through the laughter of the other.[127] It is only the laughter of the other that allows us to overcome the inhibitions that stand in the way of our pleasure. Freud seems to think that in a similar way we can find the autoerotic pleasures of our early childhood only through the use of the pleasure of the other. What does this mean?

The paradigm of infantile sexuality,[128] so we were told, is not the child at its mother's breast, but the lips kissing themselves. The oral drive loses its force after some time; the infant stops sucking its thumb even when not forced by adults to do so. The development of the genital zone at the beginning of puberty accompanies a renewed strengthening of the oral zone, which leads to a nervous tension that can be reduced by smoking and drinking or by hysterical vomiting. In these phenomena the oral drive shows its new strength without giving any new pleasure. But some ferocious thumb suckers, says Freud, manage to become not only heavy smokers or drinkers, but also "gourmets in kissing," with a tendency toward "perverse kissing." In this way, the old oral pleasures are brought to life again through the pleasure of the other, which is the new aim of sexual activity. Fore-pleasure is first and foremost pleasure at the pleasure of the other. Once again, we find an irrevocable distance between infantile sexuality and its re-investment at the beginning of puberty.[129]

This logic of preliminary pleasure, together with the idea of infantile autoerotism being radically without object, determines Freud's theory of aesthetics: the asocial (non-objectal) pleasures of early childhood can be retrieved only through a social activity aimed at the pleasure of the other. In theater, for instance, we repeat the playful activity of children. However, the child's play is asocial; it is not essentially directed toward an audience.[130] Theater, on the contrary, is unthinkable apart from the audience for which it is performed.[131]

Deconstructing Normativity

Freud's theory in the first version of *Three Essays* differs on many points from the image we have of his thinking and the genesis thereof. This first version contains a radical deconstruction of the normative distinction between pathology and normality. But does this mean that Freud—assuming for a moment that he had remained consistent with his own starting points—would have said that *in sexualibus* anything goes? We doubt it. Indeed, Freud explains why sexuality is intrinsically conflictual. The reaction formations he is talking about—in particular shame and disgust, but also guilt and morality, for example—imply that the experience of sexuality is never without inherent limitations. The need for

variation also always involves potential conflict. In our opinion, this can also explain why sexuality is inevitably subject to a (historical and contingent) law. Freud says not only that experiences of shame, guilt, disgust, and the like belong to the very nature of sexuality, but also that the content of these experiences—*what* it is exactly that we consider to be disgusting or shameful—depends to a high degree on the social and cultural circumstances in which we live.[132] This implies that every culture is confronted with the inevitable task of providing concrete content to these experiences.[133] In other words, no culture can escape from imposing concrete regulations on sexuality, but these regulations are not prescribed by nature. Culture is inscribed in already existing psychic patterns and dams, and is thus not the "radical other" of nature. But this does not mean that nature can legitimize culture either. What Freud wants to show is not so much that sexuality does not need regulation or legislation—perhaps the opposite—but that ultimately no such concrete regulation has a *fundamentum in re*. In this respect Freud is essentially anti-Aristotelian.

Despite the critical potential of his theory, Freud on several occasions falls back into the "popular opinion" that he rejects. We have already discussed some of the passages that illustrate this tendency. These passages—one can for instance think here of the introductory paragraphs to "The Transformations of Puberty"—reintroduce a heteronormative perspective or re-establish a strict (and "natural") distinction between the normal and the pathological (in particular the perversions). Arnold Davidson correctly remarks that we should not interpret the tensions these passages introduce into the text as a deconstructive indeterminacy or an undecidability of the text. Rather, what is at stake is a certain mentality, a shared culture, from which Freud could not escape. Davidson defines a mentality as "a set of mental habits or automatisms that characterize the collective understanding and representations of a population."[134] Freud introduced a set of concepts that, at least in principle, enabled a rupture with the psychiatric style of reasoning that supported the mentality of his day—a mentality in which he at the same time inevitably participated. Hence, it is the divergent temporality of the disappearance of an old mentality and the emergence of new concepts undermining it that can explain Freud's difficulty in grasping the radical character of his own thinking. The instability of his text seems to be a direct result of this state of affairs.

The Disappearance of Hysteria

In later versions of *Three Essays*, Freud does not strengthen the original paradigm or achieve further emancipation from the old mentality. On the contrary, the newly inserted passages—especially the additions made in the 1915 and 1920 versions—further undermine his 1905 theory of sexuality and seem to lead Freud away from a number of his most radical intuitions that we find in the original edition. These new paragraphs sometimes bluntly contradict the earlier ones that Freud nevertheless retains in the text. Henceforth, the instability of *Three Essays* is no longer a matter of a divergent temporality in which an old mentality persists alongside newly emerging concepts; rather, it is generated by an opposition between two types of concepts. We cannot comment here on all the changes that Freud introduced in the later versions of his text. We will limit ourselves to those that seem most relevant for the illustration of our idea that they are incompatible, or at least difficult to reconcile, with Freud's earlier views.

In the original edition of *Three Essays*, Freud seems to think that the change from autoerotic infantile sexuality to objectal adult sexuality does not imply any special problem and that it occurs in relation to biological changes, without special difficulties in most cases. However, the years prior to and after 1905 also see Freud embarking on an intense correspondence and a passionate debate with Jung on psychosis and on the sexual nature of the libido. In 1907, Jung published his book on *dementia praecox*, in which the memoirs of Senatspräsident Schreber are mentioned for the first time in the history of psychoanalytic thinking.[135] Freud would return to these famous memoirs in his case study on Schreber that was published in 1911 and contains his own most articulate theory of psychotic pathology.[136] It is also through Jung that Freud was kept up to date with contemporary developments in psychiatry. One of the main developments in this field was the "disappearance" of Charcotian hysteria.[137] Whereas hysteria had been one of the main topics of psychiatry in the second part of the nineteenth century, it was rapidly disappearing as an independent syndrome by the beginning of the twentieth century. Its symptoms were redistributed among newer diagnostic categories of which schizophrenia was undoubtedly one of the most important.[138] We cannot articulate all the

consequences of these changes for Freud's thinking, but some of them deserve our attention here.

The systematic reflection on psychosis that Freud began in his discussions with Jung confronted him with a problem for which the study of hysteria had not really prepared him. Indeed, psychosis confronted him with the fact that both the object and the ego supporting the relation to it can be absent, or can be lost in the course of our existence. Whereas hysteria taught Freud about the importance of sexuality for human existence, psychosis now informed him about the uncertain status of our relation to reality as such. Freud had no choice but to tackle this problem, but at the same time he did not want to give up the primacy of sexuality. Once again, the limitations of Freud's structural opposition between sexuality and food intake became obvious. Both Jung and Bleuler showed Freud that the "loss" of reality that characterizes psychosis refers to a dysfunction at the level of affectivity or, in more contemporary terms, our affective attachment to the world and to others. This affective relation to reality obviously cannot be reduced to the narrow definition of self-preservation that Freud used in his texts. And since Freud acknowledged only two drives, he had no choice but to consider this relation as essentially sexual. The conflicts with Jung on the libido theory, and with Adler on the nature of the ego in its function of relating to objects (through aggression, power), were born from this commitment.

In the context of his discussions with Jung, Freud introduces the concept of narcissism: the ego comes about by a "new psychic act" that consists in taking oneself as love-object.[139] In his famous work on Schreber's case, Freud writes the following on narcissism:

> There comes a time in the development of the individual at which he unifies his sexual instincts (which have hitherto been engaged in auto-erotic activities) in order to obtain a love-object; and he begins by taking himself, his own body, as his love-object … The line of development then leads on to the choice of an external object with similar genitals—that is, to homosexual object-choice —and thence to heterosexuality.[140]

Several things can be learned from this passage. First, it clearly indicates in what respect the introduction of narcissism is meant to orient (infantile)

sexuality toward the object. As a result, infantile sexuality is no longer without an object. Second, this newly introduced concept of narcissism goes along with a developmental perspective that was almost completely absent from the 1905 edition of *Three Essays*. Freud now thinks that the finding—or if one prefers, the constitution—of the sexual object is the result of a psychic evolution in the course of which many things can go wrong—and which hence needs to be studied in great detail. In this context, Freud rethinks the status of the erogenous zones in a fundamental way. Whereas in the 1905 edition, these zones and the drives of which they are the seats are considered to act anarchically until the primacy of the genital zone is put in place, Freud now orders them in a temporal sequence. In "The Disposition to Obsessional Neurosis," Freud introduces the concept of pre-genital organization and describes an anal organization of the libido.[141] In the 1915 edition of *Three Essays*, he adds a new paragraph on "the phases of development of the sexual organization" in which he recognizes the existence of an oral, cannabalistic organization of the libido that precedes the anal phase.[142] Finally, in "The Infantile Genital Organization of the Libido," Freud mentions the existence of a phallic phase that succeeds the two previous ones.[143] As has already become clear from his statement on narcissism in the Schreber case, Freud has a tendency to situate these "phases" on a developmental line that starts with a homosexual object-choice and leads to a heterosexual one. The constitution of the sexual object is fundamentally identical to the constitution of a heterosexual object. This brings us to one of the most defining changes in Freud's thinking after 1905: the reference to a structural and invincible bisexuality that was central to the hysterical disposition loses much of its importance.[144] It tends to be replaced by an opposition between hetero- and homosexuality in such a way that it is difficult to avoid the conclusion that heterosexuality is the normal (normative) outcome of the evolution at hand.

As we have noted, the Oedipus complex is completely absent from the first version of *Three Essays*, and in the later editions it is mentioned only twice and exclusively in footnotes. Perhaps Freud himself realized that introducing a paragraph on the Oedipus complex in the main text would not have been an easy task without radically rewriting the whole theory of sexuality. Freud abstained from such a project. He basically added new

paragraphs and only occasionally removed original passages or concepts. Developing the meaning and function of the Oedipus complex in great detail might have made it all too obvious that he was progressively reintroducing a concept that both radically contradicts the one governing the first version and deconstructs the "psychiatric style of reasoning." Indeed, together with the successive "phases" that we mentioned, the Oedipus complex inevitably introduces the idea of what Moll would have called the "principle of teleology," a normal psychological development that at least in principle finds its completion in a heterosexual relation. From a radical critique of the "popular opinion" on sexuality, *Three Essays* thus threatens to become a subtle defense of it.[145]

The last quarter of the nineteenth century and the beginning of the twentieth century were the heyday of hysteria and related pathologies, such as multiple personality disorders.[146] Freud understands hysteria from the perspective of a disposition in which the "perverse nature" of human sexuality plays a crucial role. Hence the importance of sexology for Freud's early thinking. *Three Essays* belongs to this tradition and at the same time breaks away from it. Hysteria (and perversion) is no longer just a psychiatric category, but attains an anthropological significance and becomes a paradigm for the understanding of human existence. But by the time Freud published his text, psychiatry was rapidly changing. Hysteria was disappearing as a possible diagnosis, and other diagnostic categories —schizophrenia in particular—were introduced. Freud confronts these changes in his discussion and correspondence with Jung immediately after the publication of *Three Essays*. The 1905 edition thus closes the era of hysteria. From then on, psychosis, obsessional neurosis, and, somewhat later, melancholia replaced hysteria as Freud's main paradigm for the understanding of psychopathology and human existence.[147] Hysteria's "disappearance" coincides with a reinscription of psychoanalytic theory in the "psychiatric style of reasoning" that *Three Essays* first mercilessly criticized.

Translating the First Edition of Freud's *Drei Abhandlungen zur Sexualtheorie*

Anyone taking on the "Task of the Translator" with regard to the first edition of *Drei Abhandlungen zur Sexualtheorie* would do well to bear in mind Freud's own considerations on translation.[1] They are integrally tied up with the conceptual and theoretical formation of the text of *Drei Abhandlungen*, as well as with its later transcriptions and reception.

In a famous letter (no. 52) to Fliess dated December 6, 1896, Freud lays out his theory of the sedimentation of memory traces in distinct registers involving inscription, transcription, and translation—and posing challenges of translation in turn:

> I must emphasize the fact that the successive transcripts [*aufeinanderfolgende Niederschriften*] represent the psychical achievement of successive epochs of life. At the frontier between any two such epochs a translation [*Übersetzung*] of the psychical material must take place … Each later transcription [*spätere Überschrift*] inhibits its predecessor and takes over the excitatory process from it. If the later transcription [*spätere Überschrift*] is lacking, the excitation will be disposed of according to the psychological laws governing the earlier psychical epoch and along the paths which were then accessible. Thus an anachronism remains: in a particular province *fueros* are still in force. Relics [*Überlebsel*] of the past still survive.[2]

Elaborating these inscriptions, transcriptions, and translations from the mid to late 1890s, Freud arrives at the notions of organic repression, the diphasic onset of sexuality, and *Nachträglichkeit*, all of which are fundamental to his theorizations in *Three Essays*, notably those related to

the transformations of infantile sexuality at puberty, and those explaining the relation between the perversions and neurosis. The sedimentation captured in the terms of *Niederschrift*, *Umordnung*, *Umschrift*, *Übersetzung*, *Überschrift*, *Übertragung* would also pertain to the diachronically layered composition of *Three Essays* as it underwent multiple revisions between the first edition in 1905 and the last in 1924.

This volume presents the first English-language translation of the first edition of Freud's *Drei Abhandlungen*. In Freud's terms, this first edition may well be called an *Überlebsel*—a neologism[3] combining, in the form of a condensation described similarly for the dreamwork (1900) and the joke (1905), *Überbleibsel* (remainder, remnant) and *Überleben* (surviving, survival). *Überlebsel* signifies a surviving remnant, a remnant still producing effects. It allows us to trace the text's conceptual lineages, which have, in turn, attracted renewed interest in linking the theoretical revolution of *Drei Abhandlungen* with projects of rethinking psychosexual development, seduction theory, and the relation between the normal and the pathological.

Instinkt and *Trieb*

To examine some of the conceptual lineages through the double lens of translation, we may start with the notion of *Trieb*, which is pivotal to psychoanalysis yet is notorious for being "untranslatable."[4] Strachey uniformly translates *Trieb* as "instinct," but the term *Instinkt* does not occur in *Drei Abhandlungen*—or rather, it is used only once, as an adjective, and then by way of a comparison.[5] To a reader who has become acquainted with Freud's *Three Essays* through Strachey's translation, this may come as a surprise.

Strachey, who translated Freud's writings from 1924 onward, justifies this translation decision by pointing out (in the General Preface of the *Standard Edition*) that at the time "drive" was "not an English word" and that, moreover, it was a vague and indeterminate term, used to cover "a variety of different concepts." However, it has since become one of the central concepts in psychoanalysis, even in its reception in the English language (see, for example, Clark Hull's influential "drive reduction theory" [1943]), thus necessitating a revised translation.[6]

To a reader who has become acquainted with Freud's writings through their reception in France, primarily in the work of Lacan and Laplanche, it may come as a surprise to find that Freud does not go to any lengths to distinguish *Trieb* from *Instinkt*. This distinction has become more explicit in the explanations of the French translators of Freud, notably those of Laplanche and Pontalis, who critique the translation of *Trieb* as "instinct," referring the latter to the biological.[7] However, even though Laplanche and Pontalis translate the German term *Trieb* into the French term *pulsion*, stressing the difference between *Trieb* and *Instinkt* in Freud's writings,[8] the English translation of their entry on 'Instinct (or Drive)' in their influential dictionary *The Language of Psychoanalysis* (1967) reverts back to rendering the term *Trieb* as "instinct," citing the authority of the *Standard Edition*.[9]

Looking at the original German version of *Drei Abhandlungen*, it emerges that Freud uses *Trieb* for both humans and animals, and that he does not restrict it to sexuality. Quite the contrary: even in the opening sentences of this text, he speaks of a *Trieb nach Nahrungsaufnahme* and he further mentions the *Geschlechtstrieb* that humans and animals have in common. However, he proceeds to differentiate the human *Geschlechtstrieb* from the *Trieb nach Nahrungsaufnahme*; even in the case of infantile sexuality, *Sexualtriebe* are differentiated from the need for food intake. Thus, Freud leaves aside the *Trieb*/*Instinkt* distinction, which, it turns out, remains largely without consequence for the articulation of his theory.

The major distinction in *Drei Abhandlungen* is that between *Geschlechtstrieb* and *Sexualtrieb*. In *Drei Abhandlungen*, these terms distinguish two different sexual regimes in humans, rather than the different sexual regimes of animals and humans, as the older discussions on the difference between *Instinkt* and *Trieb* seemed to imply.

Geschlechts- and *Sexual-/sexuell*

Central to the continued interest in the "*Überlebsel*" of the first edition of *Drei Abhandlungen* is the discovery, and the rediscovery in this translation, of infantile sexuality as distinct from adult sexuality. It finds its expression in the distinct terms of *Geschlechts-* and *Sexual-/sexuell*.

Strachey translates both as “sexual.” The translation presented in this book reinstates the distinctness of Freud’s terms through the distinct English terms “genital” and “sexual.”[10] This decision is in keeping with the tendency, evinced in the first edition of Freud’s *Drei Abhandlungen*, to use *Geschlechts-* and *Sexual-/sexuell* in different semantic contexts.

Geschlechtstrieb occurs in contexts where Freud is talking about “popular opinion” that holds it to be “absent in childhood and to commence in connection with the maturing process in puberty; … to manifest itself in an irresistible attraction exercised by one sex [*Geschlecht*] upon the other, and … to find its aim in genital union [*geschlechtliche Vereinigung*].”[11] Generally in *Drei Abhandlungen*, *Geschlechtstrieb* designates the object-related, genitally organized drive of adult sexuality. This would explain why Freud can also use this term with regard to adult object-related genital sexuality pertaining to inversion.

Sexualtrieb, on the other hand, is mainly used when it comes to thematizing nonreproductive forms of sexuality in which the genital zone does not play a leading role (more particularly the perversions), or which are in principle autoerotic, that is *ohne Objekt* (as is the case with infantile sexuality). In this sense, *Geschlechtstrieb* and *Sexualtrieb* refer to two different sexual regimes.[12]

Geschlecht and “Gender”

Freud also uses the term *Geschlecht* when referring in the most general way to “the anatomical difference between the sexes.” In those cases, the translation presented in this book renders it as “sex” (as in the colloquial terms “the same sex,” “the opposite sex”). The colloquial English term “sex,” like the German term *Geschlecht*, includes the social-symbolic interpellations whose relation with biological markers became the subject of intense theorization and debate from the 1950s onward.

The possibility of the terminological distinction between “sex” and “gender” was not historically, conceptually, or discursively available to Freud at the time of writing any of the various editions of *Drei Abhandlungen* (or to Strachey in his translation of the 1924 edition), even as the work makes pathbreaking departures from common understandings,

from notions of social and sexual pathology, and from evolutionary biology and sexology.

In attempting to heed both German diction at the time of the publication of *Drei Abhandlungen* and the English idiom, this translation has opted to render the terminologically undifferentiated notion of *Geschlecht* (which includes the social-symbolic interpellation "gender") as "sex."

Männlich and *Weiblich*

Even though historically and conceptually the sex/gender distinction was not available to Freud, he clearly problematizes any correlation between biological markers, the determination of "sex," and psychical attributions. For Freud, there is no possibility of determining "sex" on the basis of external and internal genitals; moreover, there are no determinately corresponding secondary or tertiary "sex" characteristics. While the German adjectives *männlich* and *weiblich* do not differentiate biological from social-psychological gender-specific attributions, Freud makes it clear that we cannot talk of a correlation between somatically considered "male" and social-psychologically considered "masculine" attributions, and between somatically considered "female" and social-psychologically considered "feminine" attributions.[13] Taking a cue from this disanalogy, the translation presented in this book makes use of the distinction that is possible in the English language between "male" and "female" on the one hand, and "masculine" and "feminine" on the other, to designate somatic and social-psychological ascriptions, respectively.

Psychisch

Related to Strachey's translation of *Trieb* as "instinct"—its counterpart, as it were—is his translation of Freud's adjective *psychisch* as "mental." What becomes apparent in this construction is the notion of a mind-body dualism that would be at odds with Freud's drive theory. In fact, Freud is at pains in *Drei Abhandlungen* to establish a distinct form of *Wissenschaft* between the etiological inquiry of the biological sciences and the hermeneutics of interpretation in the cultural field, but not reducible to either.

The word “psychic” was available in English from the 1870s at the latest, albeit in the context of parapsychology and spiritualism (for instance, in the experiments with what Edmund William Cox described as “psychic force”). To distinguish Freud’s usage of the adjective from this context, the translation presented in this book uses “psychical” for any instance of the adjective *psychisch*, except in cases where “psychic” has entered into the specialized vocabulary of psychoanalytic theory (e.g., “psychic apparatus”).

Infantile Sexualität

Chief among the concepts that paved the way for the theorization of infantile sexuality, and more specifically of infantile *Sexualtriebe*, are constitutional bisexuality and polymorphous perversity, both of which involve the partial drives, erogenous zones, and nonfunctional, nongenital pleasure-seeking.

Several of the operative terms characterizing infantile sexuality are beset with translation problems, or have been rendered problematic by previous translations.

Partialtriebe

Even though Freud talks about the composite nature of the drives, revealed in their dissociation in the perversions, it would not be appropriate to translate *Partialtriebe* as “component instincts,” as Strachey does. “Component” suggests an element within an integrated whole. It is true that the idea of progressive integration—and regressive disintegration—of the different *Partialtriebe* is present in Freud’s writings, and it is also true that he sometimes presents integration as the ultimate goal of human development. But this is definitely not the only line of thought in his theorizations of sexuality. Since *Partial-* is easily translatable as “partial,” there is no reason to privilege one particular term in Freud’s *Three Essays* —that denoting “completeness”—at the expense of other tendencies, and at the expense of the complexity of the text.

Erogene Zonen

In identifying certain *Körperstellen* as erogenous zones, Freud describes the former as nonspecified areas of the body that then attain specific significance as *erogene Zonen*. The English phrase used by Strachey, "regions of the body" is not, however, as specific as *Körperstellen*; hence this translation has opted for the term "zones" in the generic sense, which are specified as "erogenous zones" when they attain significance as such.

Lutschen, ludeln, and wonnesaugen

For the oral and tactile activities of young children described by Freud in the second essay, the English language has only the verb "to suck," whose semantic domain relates to taking in liquid food. There are no English words to signify the nonfunctional, heightened pleasures by which Freud differentiates the infantile sexual drive (*lutschen*, *ludeln*, *wonnesaugen*) from the drive to take in food (*saugen*). While the German language expresses the former with *lutschen* (as in *Daumen lutschen*, *Bonbon lutschen*) or, to add the Austrian variant, *ludeln*, the English language would have to designate this with adjectival or adverbial specifications or circumscriptions. Thus, the translation presented here has opted for translating *lutschen* and *ludeln* as "sensual sucking," and *wonnesaugen* as "blissful sucking," highlighting, in the latter case, the orgasmic quality and the absorption of attention that would be deserving of the English term "blissful oblivion."[14]

Unterdrückung and *Verdrängung*

One way or another, infantile sexuality becomes subject to repression. This process is what Freud calls *Verdrängung* ("repression"), but occasionally he also refers to it as *Unterdrückung* ("suppression") in the contexts of both neurosis and perversion.[15] The translation presented here follows Freud's employment of these different terms, even as he uses them synonymously.

The fact that Freud uses a relatively undifferentiated notion of *Verdrängung* across these different contexts indicates that he has a less than clear-cut concept of it at the time of writing the first version of *Drei Abhandlungen.*

Differentiation yet Consistency

This translation upholds the distinctions Freud invokes when drawing on terminology from the economic and dynamic semantic fields.

The economic terms—*Verlockungsprämie* ("incentive bonus"), *Nebengewinn* ("subsidiary gain"), *Vorlust* ("fore-pleasure"), *Endlust* ("end-pleasure"), *Nebenwirkung* ("side effect"), *Nebenbedingung* ("accompanying condition"), *Miterregung* ("concomitant excitation"), *Sexualitätszuflüsse* ("streams of sexuality")—have been captured, in all their idiosyncrasy, in distinct English terms.

The dynamic explanations related to conditions of discharge are rendered in this translation through distinct terms for *Abfuhr* ("finding an outlet"), *Entlastung* ("relief"), *Entleerung* ("emptying"), *Herausbeförderung* ("emission"), *Entladung* ("discharge"), and *Sexualentbindung* ("release of sexuality").

Likewise, terms related to the dynamics accounting for the raising of tension—*Strebungen* ("strivings"), *Reize* ("stimuli"), *Reizungen* ("stimulations"), *Reizbarkeit* ("susceptibility to stimulation"), *Regungen* ("stirrings"), *Erregungen* ("excitations"), *Erregbarkeit* ("excitability"), *Impulse* ("impulses"), *Drang/ Dränge* ("urge/urges"), *Kraft* ("force"), *Triebkräfte* ("driving forces")—are each rendered with a different English term.

Freud describes several kinds of ruptures in the latency period, disrupting a linear notion of psychosexual development; and the specificity of each kind of rupture—*Durchbrechungen* ("ruptures"), *Durchbrüche* ("breaches"), *hervorbrechen* ("erupt"), and *durchbrechen* ("break through")—is maintained in the translation through the use of different English terms for each of the terms used in Freud's text.

Nonspecific *Störungen* of the most varied kinds, expressed in various compound nouns and adjectival descriptions, such as *sexuelle Störungen*, *Eßstörungen*, *Störungen in der Nahrungsaufnahme*, *nervöse Störungen*, *pathologische Störungen*, do not have the status of nosographical classifications; nor do they indicate lack or impairment of functionality. Therefore, instead of using the terms "disorders" or "dysfunctions," this translation has consistently rendered them as "disturbances" in the nonspecific sense, qualified only by the domains, noted by Freud, in which they are registered (*sexuell*, *Nahrungsaufnahme*, etc.).

Terms Derived from Latin and Greek

In tracking the multilayered semantic fields in Freud's text, this translation attempts to adhere as closely as possible to the etymological status of the terms as far as English idiom and diction allow. More specifically, this means retaining the terms derived from Latin (pedicatio, mons veneris) and Greek (algolagnia, catharsis, anastomosis) where they appear and following Freud's lexical and semantic choices as closely as possible. Doing so entails steering away from the Greek terms Strachey introduced (scopophilia, cathexis), by which he sought to endow Freud with the distinction of "an English gentleman of science" of the nineteenth century[16] and which have aroused the ire of several commentators and critics.

Heeding Bruno Bettelheim's objection to scopophilia in particular,[17] *Schaulust* is here translated as "sexual pleasure in watching," rather than simply "looking," to show the intentional nature of the act (*des sexuell betonten Schauens*[18]*)*. Bypassing Strachey's "cathexis" and returning to the sense of Freud's use of the participle *affektbesetzt*,[19] this translation has settled on the past participle, "beset [with affect]," of the Old English verb *besettan*.

Strachey's Unannotated Additions

Strachey's translation of Freud's *Collected Works* remains a monumental achievement. His prefaces to Freud's individual texts, which detail the history of their major concepts and their significance for psychoanalytic theory, as well as the history of the texts' variants, additions, and editions, has become a guiding thread for Freud scholarship, as for all future editions. This achievement should not, however, keep us from noting changes, additions, and deletions that have gone largely unnoticed, or that were not selected for annotating.[20]

The following page numbers refer to the page numbers in the original version of Freud's first edition. All Strachey's interpolations appear in bold.

p. 23, para 2: “The hysterical character shows a degree of *sexual repression* in excess of the normal measure, an intensification of resistances against the sexual drive known to us as shame and disgust **and morality,**[21] as if it were an instinctive flight from any intellectual preoccupation with the problem of sexuality which, in particularly pronounced cases, retains complete ignorance of sexual matters right into the age of genital maturity.”

p. 41, para 3: “The retention of the faecal mass, which is at first deliberate, serving as a quasi-masturbatory stimulus to the anal zone **or to be employed in his relation to the people looking after him,**[22] is incidentally one of the roots of constipation so common among neuropaths.”

p. 71, para 2: “Having come to think of the perverse tendencies in terms of a collateral filling of subsidiary channels when the main current of the **instinctual**[23] stream has been redirected by ‘repression’, we added the explanation for the predominance of perverse tendencies in psychoneurotics, and then proceeded to consider sexual life in childhood.”

Typographical, Onomatographical, and Punctuation Errors in the Printed Text of the First Edition

The first edition of *Drei Abhandlungen* contains a number of typographical and printing errors that will not be listed here, as they remain inconsequential for the English translation.[24]

There are, however, a few onomatographical errors that do deserve mention, as they yield some insight into Freud’s relation to his sources, and their authors, well known to Freud.

Freud spells the name of G. Frank Lydston incorrectly, rendering it “Lydstone”[25] in all German-language editions of *Drei Abhandlungen* published during his lifetime. Furthermore, Freud consistently misspells the initial of Iwan Bloch, rendering it as “J. Bloch,”[26] and omits the ‘c’ in the surname of Albert von Schrenck-Notzing.[27]

Three Essays on the Theory of Sexuality

BY

SIGMUND FREUD

1

The Sexual Aberrations[1]

The fact of genital needs in man and animal is expressed in biology by the assumption of a genital drive. This drive is considered analogous to the desire for food, that is, to hunger. Common language does not have an expression corresponding to “hunger”; science designates this as “libido.”

Popular opinion makes certain definite assumptions concerning the nature and qualities of this genital drive. It is supposed to be absent in childhood and to commence in connection with the maturing process in puberty; it is supposed to manifest itself in an irresistible attraction exercised by one sex upon the other; and it is supposed to find its aim in genital union, or at least such actions as would lead to such union.

But we have every reason to consider these assumptions as providing a very untrustworthy image of reality. On closer examination, they turn out to abound in errors, inaccuracies, and hastily drawn conclusions.

If we introduce two terms and call the person from whom the attraction on the other sex emanates the *sexual object* and the action impelled by the drive the *sexual aim*, scientifically considered experience will show us numerous deviations in terms of both sexual object and sexual aim, whose relation to the accepted norm requires thorough investigation.

1. Deviations with Reference to the Sexual Object

The popular theory of the genital drive corresponds closely to the poetic fable of the division of man into two halves—man and woman—that strive to become reunited through love. From this perspective, it would be very

surprising to hear that there are men for whom the sexual object is not a woman but a man, and that there are women for whom the sexual object is not a man but a woman. Such persons are called countersexuals, or rather inverts; the relevant phenomenon is termed *inversion*. The number of such persons is considerable, even though it is difficult to determine it with any degree of accuracy.[2]

A. Inversion

The behavior of inverts

The above-mentioned persons vary greatly in their behavior in several respects.

a) They may be *absolute* inverts, that is, their sexual object can only be of the same sex, while the opposite sex can never be for them an object of sexual longing, but leaves them indifferent or even evokes sexual repugnance. As men they are unable, on account of this repugnance, to perform the normal genital act, or they cannot find any enjoyment in its performance.

b) They may be *amphigenic* inverts (psychosexually hermaphroditic), that is, their sexual object may be of the same or of the other sex; the inversion thus lacks the character of exclusiveness.

c) They may be *occasional* inverts, that is, under certain external conditions, chiefly the inaccessibility of the normal sexual object and imitation, they may take as sexual object a person of the same sex and find gratification in the sexual act with that person.

Inverts further manifest varying attitudes in how they judge the peculiarities of their genital drive. Some take the inversion as a matter of course, just as normal persons accept the direction of their libido, and insist that its status is equal to that of the normal libido. Others rebel against the fact of their inversion and feel it as a pathological compulsion.[3]

Further variations relate to the time when the inversion developed. Characteristic features of the inversion may depend on whether it goes back as far as the individual can remember, or whether the individual has become aware of it at a particular time either before or after puberty.[4] Either a particular characteristic of the inversion is retained throughout the

life of the individual, or it recedes temporarily, or it features as an episode on the road to normal development. In some cases, a periodic vacillation between a normal and an inverted sexual object has been observed. Of special interest are those cases in which the libido changes, taking on the characteristics of an inversion, after a distressing experience with the normal sexual object.

These different series of variations generally exist side by side, independently of each other. At its most extreme, one can safely assume that the inversion has existed from a very early age, and that the person feels at one with that peculiarity.

Many authors would refuse to class together the cases enumerated here, preferring to draw out what distinguishes them rather than what they have in common, in accordance with their own preferred assessment of the phenomenon of inversion. Nevertheless, as legitimate as the distinctions might be, it cannot be overlooked that all intermediate stages are abundantly represented, strongly suggesting that we are dealing with the formation of a series.

Conception of inversion

Inversion first garnered attention with the supposition that it was an innate sign of nervous degeneracy. This initial supposition was consonant with the fact that medical observers first noticed it in persons suffering from, or appearing to suffer from, nervous illnesses. This categorization contains two assumptions that should be assessed independently of one another: the assumption that inversion is innate, and that it is a phenomenon of degeneracy.

Degeneracy

The attribution of “degeneracy” to inversion is subject to objections against the indiscriminate use of the word in general. It has become commonplace to attribute any manifestation of illness not due to trauma or infection to degeneracy. Magnan’s classification of degenerates has allowed for the possibility that even in cases where the nervous system is functioning at the highest levels, the applicability of the concept of degeneracy need not be excluded. Under the circumstances, it may well be asked whether the ascription of “degeneracy” is of any use, and whether it adds any new content. It would seem less appropriate to speak of

“degeneracy” in instances where (1) there are not several marked deviations from the norm converging, and (2) there are no severe impairments to the capacity for achieving and for living life in general.[5]

Several facts show that inverts cannot be considered degenerate in the legitimate sense of the term:

1. Inversion is found in persons who otherwise do not manifest any marked deviations from the norm.

2. It is found also in persons whose capacity for achieving and for living life in general is not impaired and who, indeed, distinguish themselves through a high level of intellectual development and ethical standing.[6]

3. If we disregard the patients through whom we have gained medical experience and attempt to take in a wider horizon, we come across two kinds of facts that prohibit us from casting inversion as a sign of degeneracy:

a) crucially, inversion is a frequently occurring phenomenon—an institution with important functions—among the peoples of antiquity at the height of their culture;

b) inversion is remarkably widespread among many savage and primitive peoples, whereas the concept of degeneracy is usually restricted to states of high civilization (cf. J. [*sic*] Bloch). Even among the civilized peoples of Europe, climate and race are the most important factors in the distribution and assessment of inversion.[7]

Innate character

As is to be expected, the innate character of inversion has been attributed only to the first case, the most extreme class of inverts. This attribution is based on these persons’ assurance that at no time in their lives was there an indication of any other direction of the sexual drive. Even the occurrence of inversion as seen in the two other classes, particularly the third one, is difficult to reconcile with the notion of an innate propensity. This explains why those who support this notion would tend to distinguish the group of absolute inverts from all others, which prevents us from developing a generally valid theory of inversion. In one group of cases, inversion was, according to those who support this notion, considered an innate trait; in other cases, it might have come about in other ways.

In contrast to this notion is the alternative view, according to which inversion is an acquired trait of the genital drive. It is based on the following observations:

1. Many inverts, even absolute ones, can be shown to have been under the influence from very early on in their lives of a sexual impression which consistently resulted in the development of a homosexual inclination.

2. Many others can be shown to have been subject to external influences, either favorable or inhibiting, which could have led sooner or later to the fixation of the inversion (e.g., exclusive relations with the same sex, comradeship in war, detention in prison, risks associated with heterosexual intercourse, celibacy, weakened genital performance, etc.).

3. Inversion can be removed by hypnotic suggestion, which would be surprising if it were of an innate character.

These considerations may lead one to doubt the very notion of innate inversion. One may object (as does Havelock Ellis) that on closer examination of the cases classified as innate inversion, some early childhood experience would probably come to light which had a determining influence on the direction of the libido; such experience would not have been retained in the conscious memory of the person concerned but could be recalled to memory through an appropriate influence. In the view of these writers, inversion can be described only as a frequent variation of the genital drive that can be determined by any number of external circumstances in the subject's life.

The apparent certainty thus reached is, however, countered by the contention that there are many persons who demonstrably experience the same sexual influences (even early in their youth—for example, through seduction or mutual masturbation) without becoming inverted or remaining permanently inverted. Hence one is led to suppose that the innate/acquired opposition either is incomplete or does not cover all the issues involved in inversion.

Explanation of inversion

The nature of inversion is explained neither by the assumption that it is innate, nor by the alternative assumption that it is acquired. In the former case, one would have to specify in what respect it is innate, unless one were to accept the crudest explanation that everyone is born with the

sexual drive attached to a particular sexual object. In the alternative case, the question arises as to whether the various accidental influences are sufficient to explain the acquisition of inversion if there is not something in the individual that can meet them halfway. As we have shown earlier, the existence of this last factor is undeniable.

Explanation of inversion on the basis of bisexuality

Ever since the considerations put forward by Frank Lydston, Kiernan, and Chevalier, the possibility of sexual inversion has been explained by a new set of ideas once again contradicting popular opinion, which holds that a human being is either man or woman. But science recognizes cases in which the characteristics of the sexes are obscured and in which it is consequently difficult to determine the sex—anatomically to begin with. For the genitals of the individuals concerned combine male and female characteristics (hermaphroditism). In rare cases, both kinds of genital apparatus are found fully developed side by side (true hermaphroditism), but in most cases by far, one finds both sets of organs in an atrophied condition.[8]

The significance of these abnormalities lies in the fact that, in quite unexpected ways, they make it easier to understand normal anatomical formation. For a certain degree of anatomical hermaphroditism is perfectly within the norm; in every normally developed male or female individual, traces are found of the apparatus of the opposite sex which either persist as rudimentary organs without function, or become modified to take over other functions.

These long-familiar facts of anatomy give rise to the idea of an originally bisexual disposition that is transformed, in the course of development, toward a monosexual one, with small residues of the atrophied sex.

It would have seemed consistent to transfer this conception to the psychical sphere, and to understand inversion in its varieties as an expression of psychical hermaphroditism. All that was required to settle this question was that inversion should regularly be accompanied by the psychical and somatic signs of hermaphroditism.

But this expectation proves to be incorrect. It is impossible to demonstrate so close a connection between the hypothetical psychical hermaphroditism and the demonstrable anatomical one. A general

lowering of the genital drive is frequently found in inverts (Havelock Ellis), along with a slight anatomical atrophy of the organs—frequently, but by no means regularly or usually. Inversion and somatic hermaphroditism should thus, on the whole, be understood as being independent of each other.

A great deal of importance has, moreover, been attached to the so-called secondary and tertiary characteristics of the sexes, and to the increased frequency of their occurrence in inverts (H. Ellis). Again, much of this is correct, but one should not forget that the secondary and tertiary characteristics of one sex occur very frequently in the opposite one, thus indicating hermaphroditism without a corresponding change in the sexual object.

Psychical hermaphroditism would gain substance if the inversion of the sexual object were accompanied by a parallel changeover of the subject's other psychical qualities, drives, and character traits into those marking the opposite sex. But we can expect to find a character inversion of this kind with some degree of regularity only in inverted women; in men, the most complete psychical masculinity is perfectly compatible with inversion. If one were to persist in postulating psychical hermaphroditism, one would have to add that there are only a few conditions under which its manifestations in various spheres inflect each other. The same, incidentally, holds true for somatic hermaphroditism; according to Halban,[9] individual atrophied organs and secondary characteristics of the sexes occur fairly independently of one another.

Expressing the crudest form of the theory of bisexuality, a spokesperson for male inverts described it as a female brain in a male body. But we do not know what characterizes a "female brain." There is neither need nor justification for replacing the psychological problem with the anatomical one. The explanation ventured by Krafft-Ebing appears more precise than that of Ulrichs, but is no different in essential respects. According to Krafft-Ebing, the bisexual disposition endows every individual with male and female brain centers, as well as somatic sex organs. These centers develop only at the stage of puberty, mostly under the influence of the sex gland, which is independent of them in the original disposition. But what has been said of male and female brains applies equally to male and female "centers"—and incidentally, we do not even know whether we might assume the existence of certain delimited areas of

the brain for sex-specific functions, as we do, for instance, for the functions of language.

Nevertheless, two things remain from these discussions. Firstly, a bisexual disposition is involved in inversion, though we do not know what that disposition consists of, beyond anatomical formation. And secondly, we are dealing with disturbances affecting the development of the genital drive.[10]

The sexual object of inverts

The theory of psychical hermaphroditism presupposes that the sexual object of an invert is the opposite of that of the normal person. It stipulates that the inverted man succumbs to the charm emanating from masculine attributes, physical and psychical—that he feels himself as a woman in search of a man.

However, much as this applies to quite a number of inverts, it is far from indicating a general characteristic of inversion. There is no doubt that a large proportion of male inverts have retained the psychical character of masculinity, manifesting relatively few secondary characteristics of the opposite sex, and actually seeking female psychical traits in their sexual objects. If it were otherwise, it would remain inexplicable why male prostitutes offering themselves to inverts—today as they did in ancient times—imitate women in all external respects of attire and behavior. Such imitation would otherwise inevitably offend against the inverts' ideal. Among the ancient Greeks, where men with the strongest masculine appearance feature among the inverts, it is clear that what kindled a man's love was not the masculine appearance of the boy, but his physical resemblance to a woman, as well as his feminine psychical traits, such as shyness, modesty, and the need for instruction and assistance. As soon as the boy became a man, he would cease to be a sexual object for men, and would perhaps himself became a lover of boys. In this case, as in many others, the sexual object is not someone of the same sex, but someone who combines the characteristics of both sexes, forming, as it were, a compromise between a stirring seeking a man and another one seeking a woman, while retaining the condition that the object's body (i.e., the genitals) should be male.

The case of women who are active inverts is less ambiguous: these women frequently and peculiarly exhibit somatic and psychical

characteristics of men, looking for femininity in their sexual objects, even though closer inspection may reveal greater variety.

The sexual aim of inverts

The important fact to bear in mind is that no single, uniform aim can be identified in cases of inversion. In men, intercourse per anum by no means coincides with inversion; masturbation is just as frequently the exclusive aim; and restrictions of the sexual aim—right down to the level of a mere outpouring of feelings—are even more frequent here than in heterosexual love. Among women, too, the sexual aims of inverts are manifold; there seems to be a preference for contact with the mucous membrane of the mouth.

Conclusion

While we find ourselves unable to satisfactorily explain the origin of inversion on the basis of the material gathered so far and presented here, we feel that in the course of this investigation we have reached an insight that could attain greater significance than the solution to the problem set out above. Our attention is drawn to the fact that we imagined too close a connection between the sexual drive and the sexual object. In cases that have been considered abnormal, our experience teaches us that the sexual drive and the sexual object are merely soldered together—a fact we risk overlooking due to the uniformity of the normal configuration, where the drive appears to carry the object along with it. We are thus instructed to loosen the bond that we had imagined between drive and object. The genital drive is probably independent of its object initially, and its origin is likely not owed to the object's attractions.

B. The sexually immature and animals as sexual objects

Whereas those persons whose sexual objects do not belong to the sex normally considered appropriate to it—that is, inverts—strike the observer as a set of otherwise entirely sound individuals, cases in which sexually immature persons (children) are chosen as sexual objects immediately appear as sporadic aberrations. Only in exceptional cases are children exclusive sexual objects; they mostly come into that role when a cowardly individual who has become impotent adopts them as a surrogate, or when an impulsive (undeferrable) drive cannot at the time get hold of a more

suitable object. Nevertheless, it elucidates the nature of the genital drive that it should admit of such great variation and depreciation of its object—something that hunger, which holds onto its object much more energetically, would only permit in the most extreme instances. A similar observation may be said to apply to sexual intercourse with animals, which is by no means rare among rural folk; in these cases, the attraction of sex seems to override the species barrier.

For aesthetic reasons, one would like to attribute these and other severe aberrations of the genital drive to the mentally ill; however, that cannot be done. Experience teaches us that in cases of mental illness, no disturbances of the genital drive can be noted other than those found in healthy persons, entire races, and social classes. Thus the sexual abuse of children is found with uncanny frequency among teachers and child attendants, simply because they have the best opportunity for it. The mentally ill merely present such an aberration in an intensified form, or, what is particularly significant, such an aberration becomes exclusive and takes the place of normal sexual gratification.

This most remarkable relation between sexual variations, and the spectrum of health and mental disturbance, gives us pause for thought. I am inclined to believe that the fact to be explained here indicates that the stirrings of sex life are to be found among those who, even normally, are the least controlled by the higher psychical activities. In my experience, anyone who is abnormal mentally in any way, whether socially or ethically, is invariably abnormal in his sexual life. But many people abnormal in their sexual life resemble the average person in every other respect, and have passed through the process of human cultural development, in which sexuality remains the weak point.

The most general conclusion to be drawn from these discussions lies in the insight that under a great number of conditions and among a great number of individuals, the nature and significance of the sexual object recedes into the background. What is essential and constant in the sexual drive is something else.

2. Deviations in Respect of the Sexual Aim

What is regarded as normal sexual aim is the union of the genitals in the act known as copulation, which dissolves sexual tension and temporarily

extinguishes the sexual drive in a satisfaction analogous to the sating of hunger. But even in the most normal sexual process, we may detect some elements whose development would lead to those aberrations that have been described as *perversions*. For there are certain intermediate relations to the sexual object, such as touching it and gazing at it, which are recognized as preliminary sexual aims. On the one hand, these activities are themselves accompanied by pleasure; on the other hand, they heighten the excitation, which should persist until the final sexual aim is attained. Moreover, the kiss, one particular contact of this kind, between the mucous membrane of the lips of the two persons concerned, has attained a high sexual value among many cultures (including the most highly developed ones), although the parts of the body involved do not belong to the genital apparatus but form the entrance to the digestive tract. Here, then, are factors which link the perversions to normal sexual life, and which can also serve as basis for their classification. The perversions are either (*a*) actions of *extending* anatomically beyond the regions of the body designed for genital union; or (*b*) actions of *lingering* over the intermediate relations to the sexual object normally rapidly traversed on the path toward the final sexual aim.

a) Anatomical extensions

Overvaluation of the sexual object

It is only in the rarest of instances that the psychical valuation set on the sexual object as wishful aim of the sexual drive is limited to its genitals; more generally, the appreciation extends across the entire body of the sexual object and tends to involve all sensations emanating from it. The same overvaluation radiates to the psychical sphere and manifests itself as intellectual infatuation (with weakened powers of judgment) when considered against the actual psychical accomplishments and perfections of the sexual object to whose judgments the person concerned submits unquestioningly. The naïve faithfulness of love thus becomes an important, if not the most fundamental, source of authority.[11]

It is this sexual overvaluation that cannot easily be reconciled with the restriction of the sexual aim to the union of the actual genitals, and assists in elevating activities involving other parts of the body to sexual aims. The development of these highly varied anatomical extensions clearly

indicates a felt need for variation, which Hoche termed a *craving for stimulation*.[12]

The significance of the factor of sexual overvaluation can be best studied in men, the only category of people whose sex lives have become accessible to research, while those of women, owing partly to the stunting effect of cultural conditions and partly to the conventional secretiveness and insincerity of women, are still shrouded in impenetrable obscurity.

Sexual use of the mucous membrane of the lips and mouth

The use of the mouth as sexual organ is regarded as perversion if one person brings the lips and tongue into contact with the genitals of another, but not if the mucous membranes of the lips of both touch one another. This exception provides the link with what is normal. Those who abhor as perversions the other practices, which have no doubt been common from humankind's primeval times, are giving way to an unmistakable feeling of *disgust*, which protects them from adopting a sexual aim of that kind. But the limits of such disgust are purely conventional; a man who passionately kisses the lips of a pretty girl may be disgusted at the idea of using her toothbrush, even though there are no grounds for supposing that his own oral cavity, for which he feels no disgust, is any cleaner than that of the girl. Here, then, our attention is drawn to the factor of disgust, which interferes with the libidinal overvaluation of the sexual object but can in turn be overcome by the libido. One would be inclined to see in disgust one of the forces which have led to a restriction of the sexual aim. These forces do, as a rule, stop short of the genitals. But there is no doubt that the genitals of the other sex can in themselves be an object of disgust, and that such an attitude is one of the characteristics of all hysterics (especially women). The strength of the sexual drive loves actively overriding this sense of disgust (see below).

Sexual use of the anal orifice

Even more clearly than in the former case, it is the disgust arising from the use of the anus that stamps this sexual aim as a perversion. But I do not wish it to be considered as bias on my part if I observe that the explanation for this sense of disgust, namely that this part of the body serves the function of excretion and thereby comes into contact with something inherently disgusting—that is, with excrement—is no more

convincing than the explanation given by hysterical girls for their disgust at the male genital, namely that it serves the purpose of urinating.

The sexual role played by the mucous membrane of the anus is by no means limited to the intercourse between men; there is nothing about this preference that makes it characteristic of inverted feeling. On the contrary, it seems that pedicatio with a man owes its significance to an analogy with a similar act performed with the woman, whereas mutual masturbation is the sexual aim most common in intercourse between inverts.

Significance of other regions of the body

The sexual encroachment upon other parts of the body, with all its variations, offers us nothing that is new in principle; it adds nothing to our knowledge of the sexual drive, which hereby merely announces its intention of gaining power over the sexual object in every possible direction. But these anatomical extensions, besides sexual overvaluation, present a second factor at work which is alien to popular knowledge. Certain zones of the body, such as the mucous membrane of the mouth and of the anus, constantly recur in these practices, clamoring, as it were, for being viewed and treated as genitals in their own right. We shall later learn how this claim is justified by the development of the sexual drive, and how it is being realized in the symptomatology of certain pathological states.

Unsuitable substitutes for the sexual object—fetishism

A quite particular impression is created by those cases in which the normal sexual object is replaced by another one that bears some relation to it but is entirely unsuitable to serve the normal sexual aim. From the point of view of categorization, we should have done better to mention this most interesting group of aberrations of the sexual drive along with the deviations in respect of the sexual object. Yet we decided to postpone their mention until we could become acquainted with the factor of *sexual overvaluation* on which these phenomena depend, and which is connected with an abandonment of the sexual aim.

The substitute for the sexual object is some part of the body (such as the foot or hair) which is generally hardly appropriate for sexual purposes; or it is some inanimate object in some demonstrable relation to the person whom it replaces, and preferably to that person’s sexuality (e.g., items of

clothing, or underwear). Such substitutes are not unjustifiably likened to the fetishes in which savages see their gods embodied.

Affording a transition to those cases of fetishism in which a normal or perverse sexual aim is abandoned are cases in which the sexual object is required to fulfill a fetishistic condition—such as the possession of some particular hair color or clothing, or even some bodily defect—if the sexual aim is to be attained. No other variation of the sexual drive verging on the pathological is as clear to us in every respect as this one, despite the peculiarity of the manifestations to which it gives rise. Some reduction in the striving for the normal sexual aim (a weakness of the sexual apparatus in carrying out its functions) seems to be a precondition in every case. The connection with the normal is established through the psychologically necessary overvaluation of the sexual object, which inevitably extends to everything that is associated with it. A certain degree of fetishism of this nature is thus a regular part of normal loving, especially in those stages of being in love in which the normal sexual aim seems unattainable, or its fulfillment deferred.

> Get me a kerchief from her breast,
> A garter that her knee has pressed!
> (Goethe, *Faust*, Part I, Scene 7)

The situation becomes pathological only when the striving for the fetish, going beyond such a condition, becomes fixated and takes the place of the normal sexual aim and, furthermore, when the fetish is detached from a particular person and becomes the sole sexual object. These are the general conditions under which mere variations of the genital drive pass over into pathological aberrations.

As Binet first claimed, and as was later confirmed by ample evidence, the choice of fetish reveals the continuing influence of a sexual impression mostly received in early childhood, comparable with the proverbial "stickiness" of first love under normal circumstances (*on revient toujours à ses premiers amours*). This derivation is particularly clear in cases where there is simply a fetishistic condition attached to the sexual object. We shall encounter the significance of precocious sexual impressions elsewhere.

In other cases, it is a symbolic association of ideas, of which the person concerned is usually not conscious, that has led to the replacement of the object by a fetish. It is not always possible to prove the routes of these connections with any degree of certainty (the foot is an age-old sexual symbol which occurs even in mythology; no doubt the role of fur as fetish is owed to its association with the hair covering the mons veneris), but even this kind of symbolism does not always appear to be independent of sexual experiences in childhood.

b) Fixations of preliminary sexual aims

Appearance of new aims

All external and internal conditions impeding or deferring the attainment of the normal sexual aim (impotence, the high value placed on the sexual object, the risks of the sexual act) will understandably support the inclination to linger over the preparatory acts and turn them into new sexual aims that can take the place of the normal ones. On closer examination, it always turns out that what appear as the most alien of these new sexual intentions are already hinted at in the normal sexual process.

Touching and gazing

A certain degree of touching is indispensable, at least for human beings, for the attainment of the normal sexual aim. Everyone knows what source of pleasure on the one hand, and what influx of fresh excitation on the other hand, are afforded by the tactile sensations of the skin of the sexual object. So the lingering over the stage of touching can scarcely be counted among the perversions, provided that the sexual act is carried further in some way.

Something similar holds true of looking—an activity that is ultimately derived from touching. Visual impressions remain the most frequent pathway along which libidinal excitation is aroused; indeed, natural selection counts on the viability of this pathway, making the sexual object appear endowed with beauty. The progressive veiling of the body in the course of cultural development keeps alert sexual curiosity, which is intent on completing the sexual object by unveiling its hidden parts but which can be diverted (“sublimated”) in the direction of art if its interest can be

shifted away from the genitals onto the image of the body as a whole. For most normal persons, it is perfectly usual to linger to some extent over this intermediate sexual aim by directing their gaze in a decidedly sexual manner; indeed, doing so offers them the possibility of turning a certain portion of their libido toward higher artistic goals. The sexual pleasure of watching becomes a perversion, however, if (*a*) it is restricted to the genitals exclusively; (*b*) it is associated with overcoming disgust (as in the case of voyeurs or people who look on at excretory functions); (*c*) and if it represses the normal sexual aim, instead of preparing for it. The last pertains most explicitly to exhibitionists, who, if I may conclude this from only one analysis, exhibit their genitals in order to get to see the genitals of the other person in return.

In the perversions which are directed toward watching and being watched, we come across a marked peculiarity that we will examine more closely in the case of the aberration that we shall consider next. In these perversions, the sexual aim is present in two forms—an *active* one and a *passive* one.

The force opposing the sexual pleasure which is derived from watching, but which may be cancelled by it (in a manner previously described for the case of disgust), is *shame*.

Sadism and masochism

The most common and the most significant of all the perversions—the inclination to inflict pain on the sexual object, and to have pain inflicted upon oneself by the sexual object—is what Krafft-Ebing has identified in both of its forms, the active and the passive one, as *sadism* and *masochism*, respectively. Other authors prefer the narrower term algolagnia, which emphasizes the pleasure in pain and cruelty, while the terms chosen by Krafft-Ebing prioritize the pleasure gained from every kind of humiliation and subjection.

As regards active algolagnia, sadism, its origins are easy to detect in the normal. The sexuality of most men contains an element of *aggression*, of an inclination to overpower, whose biological significance may be found in overcoming the resistance of the sexual object by means other than wooing. Sadism would thus correspond to an aggressive component of the sexual drive that has now become independent and exaggerated and, by displacement, has taken on the leading role.

We can with equal degree of certainty deduce at least one of the origins of masochism. It emanates from the sexual overvaluation as necessary psychic consequence of the sexual object-choice. The pain that is being overcome here can be linked to disgust and shame opposing the libido as resistances.

Human cultural history shows beyond any doubt that there is an integral connection between cruelty and the sexual drive; but in trying to elucidate this connection, we have not gone beyond asserting the aggressive aspects of the libido. According to some authors, the source of aggression linked to the sexual drive is a relic of cannibalistic pleasures—that is, it involves the apparatus for obtaining mastery, which serves the satisfaction of the other, ontogenetically older, major need. It has also been asserted that every pain contains in itself the possibility of a feeling of pleasure. We will content ourselves with the impression that no satisfactory explanation of this perversion has been provided, and that it seems possible that a number of psychical strivings combine to produce a single effect.

But the most remarkable feature of this perversion is that its active and passive forms are regularly found occurring together in one and the same person. A person who feels pleasure in causing pain to someone else in a sexual relation is also capable of enjoying as pleasure any pain that he may himself derive from sexual relations. A sadist is always at the same time a masochist, even if the active or the passive element of the perversion may be more strongly developed in him, and may represent his predominant sexual activity.[13]

Thus we find certain of the inclinations toward perversion regularly occurring as pairs of opposites, and this is of great theoretical significance in relation to material to be considered later. Moreover, it is clear that the existence of the pair of opposites formed by sadism and masochism cannot be directly deduced from the admixture of aggression. One would rather be tempted to relate the simultaneous presence of these opposites to the opposite poles of masculinity and femininity combined in bisexuality.

3. The Perversions in General

Variation and illness

It is not surprising that the medical men who first studied the perversions on the basis of manifest examples and under special conditions were inclined to attribute to them, as in the case of inversion, the characteristics of pathology or degeneracy. Nevertheless, that view is even easier to dismiss in the case of perversion than it is in the case of inversion. Everyday experience has shown that most of these extensions, or at any rate the less severe among them, are constituents rarely absent from the sexual life of healthy persons, and are judged by them no differently than other forms of intimacy. Where circumstances favor such an occurrence, normal persons, too, may substitute a perversion of this kind for the normal sexual aim for quite some time, or may find a way of retaining it alongside sexual practices with the normal sexual aim. It would appear that there is no healthy person who does not have any so-called perverse addition to the normal sexual aim, and the universality of this finding is sufficient reason to show how inappropriate it is to use the word "perversion" as a term of reproach. It is precisely in the sphere of sexual life that we encounter peculiar, indeed presently insoluble, difficulties as soon as we try to draw a sharp line to distinguish mere variations within the physiological range from pathological symptoms.

Nevertheless, in some of these perversions the quality of the new sexual aim is of a kind that demands special mention. Certain of these perversions are so far removed from the normal in content that we cannot but pronounce them "pathological." This pertains especially to those cases in which the sexual drive goes to astonishing lengths in overriding the resistances of shame, disgust, horror, or pain (for instance, cases of licking shit or of sexually abusing dead bodies). But even in such cases, we cannot be sure that the people who engage in such practices could be reliably identified as insane persons, or persons with strange, grave abnormalities. Here again, we cannot escape the fact that people who behave normally in other respects can, subject to the most unruly of all the drives, reveal themselves as pathological in the sphere of sexuality alone. Manifest abnormality in other spheres of life, on the other hand, always tends to show a background of abnormal sexual behavior.

In the majority of cases, we can discern the pathological character in perversions not in the content of the new sexual aim, but in its relation to the normal. If the perversion does not appear *alongside* the normal sexual aim and object when circumstances are favorable to the perversion and

unfavorable to the normal—if instead the perversion has, to all intents and purposes, repressed and supplanted the normal—then the exclusiveness and the fixation of perversion give us cause to judge it as a pathological symptom.

The involvement of psychical factors in the perversions

It is perhaps precisely with regard to the most repulsive perversions that one would have to give the greatest scope to the involvement of psychical factors in the transformation of the sexual drive. It is in these cases that one would have to recognize the product of psychical work, which despite its horrifying result, would have to be considered the equivalent of an idealization of the drive. The omnipotence of love is perhaps nowhere as strongly evident than in such of its aberrations as these. In all matters of sexuality, the highest and the lowest are most intimately connected to each other: “From Heaven, across the world, to Hell” [Goethe, *Faust*, Prelude in the Theatre].

Two conclusions

Our study of the perversions has shown us that the sexual drive has to struggle against certain psychical forces acting as resistances, among which shame and disgust are the most prominent. We may be permitted to presume that these forces play a part in restraining that drive within limits considered normal, and if they have developed in the individual before the sexual drive reached its full strength, the course of its development would undoubtedly have been determined by these forces.

We have further remarked that some of the perversions that we have examined are intelligible only if we assume the convergence of several motive forces. If such perversions admit of analysis, that is, if they can be taken apart, they must be of a composite nature. This gives us a hint that perhaps the sexual drive itself may be no simple thing, but made up of various components that have become detached from it again in the perversions. The clinic would have thus drawn our attention to *fusions* that have been able to find less than full expression in the uniform behavior considered normal.

4. The Sexual Drive in Neurotics

An important contribution to the knowledge of the sexual drive in persons who are at least close to the normal ones is obtainable from a source accessible only via a certain route. There is only one means of obtaining thorough and non-erroneous information about the sex life of the so-called psychoneurotics (persons suffering from hysteria, obsessional neurosis, from what is falsely called neurasthenia, and probably also paranoia): to subject them to psychoanalytic investigation, which is employed in the therapeutic procedure, introduced by J. Breuer and myself in 1893, known as “catharsis.”

I must first explain, as I have already done in other publications, that, as far as my experience goes, these psychoneuroses are based on sexual driving forces. I do not mean by this that the energy of the sexual drive contributes to the forces that maintain the pathological manifestations (the symptoms). I mean expressly to assert, in contrast, that this contribution is the only constant and most important source of energy of the neurosis, so that the sexual life of the person concerned manifests itself exclusively, predominantly, or only partly in these symptoms. As I have said elsewhere, the symptoms are the sexual activities of the ill persons. The evidence for this assertion is derived from a growing number, over the past ten years, of psychoanalyses of hysterics and other persons suffering from neuroses; I hope to be able to give a detailed account of the findings at a later stage.

Psychoanalysis removes the symptoms of hysterics on the basis of the presupposition that those symptoms are substitutes—transcriptions, as it were—for a series of psychic processes beset with affect, wishes, and strivings which, through the operation of a special psychical process (*repression*), have been denied the possibility of being dealt with by psychical activity capable of reaching consciousness. These thought formations therefore, being held back in a state of unconsciousness, strive to obtain an expression appropriate to their affective value, to find an outlet; and in the case of hysteria, they find an outlet through the process of *conversion* into somatic phenomena—the hysterical symptoms. By an artful procedure involving a special technique to convert these symptoms back into thoughts now turned conscious and beset with affect, it is possible to obtain the most accurate knowledge of the nature and origin of these formerly unconscious psychical formations.

In this manner, we have learned that symptoms represent a substitute for strivings drawing their force from the source of the sexual drive. What we know about the nature of hysterics—here taken as model for all psychoneurotics—before they fall ill, and about the occasions which precipitate their falling ill, fully accords with this view. The hysterical character shows a degree of *sexual repression* in excess of the normal measure, an intensification of resistances against the sexual drive known to us as shame and disgust, an instinctive flight, as it were, from any intellectual preoccupation with the problem of sexuality, which, in particularly pronounced cases, succeeds in maintaining complete ignorance of sexual matters right into the age of genital maturity.*

This trait, which is so characteristic of hysteria, is not uncommonly covered up for the undiscerning observer by the presence of a second constitutional factor of hysteria, namely an overly powerful development of the sexual drive. Psychological analysis, however, will invariably know to uncover it, and resolve the contradictory enigma of hysteria through identifying the pair of opposites of a sexual rejection taken too far on the one hand, and an excessively felt sexual need, on the other.

In the case of persons predisposed to hysteria, the occasion for illness arises when, as a result of either their own passage toward maturity, or the external circumstances of their lives, they find themselves seriously facing real sexual demands. Between the urges of the drive and the reaction of sexual rejection, illness offers a way of escape that does not solve the conflict, but seeks to evade it by transforming libidinal strivings into symptoms. The exception is only an apparent one when a hysterical person, a man, for instance, falls ill on the basis of some trivial emotional stirring, some conflict not centered around any sexual interest. In all cases, psychoanalysis is then able to demonstrate that it is the sexual component of the conflict that has made the illness possible, by withdrawing psychical processes from the normal outcome.

Neurosis and perversion

A large part of the opposition to these views of mine is presumably due to the fact that sexuality, from which I deduce the psychoneurotic symptoms, is regarded as though it coincided with the normal sexual drive. But psychoanalytic teaching goes further than this. It shows that it is by no means only at the expense of the so-called normal sexual drive that these

symptoms originate (at any rate such is not exclusively or mainly the case); they also give expression (by conversion) to the drives which, if they could express themselves directly in fantasy and action undistracted by consciousness, would be described as perverse in the widest sense of he word. Thus symptoms are formed in part at the expense of abnormal sexuality; *neurosis is, so to speak, the negative of perversion.**

The sexual drive of psychoneurotics exhibits all the aberrations that we have studied as variations of normal, and as manifestations of pathological, sexual life.

a) In the unconscious psychic life of all neurotics (without exception), we will find stirrings of inversion and fixations of the libido upon persons of the same sex. It would be impossible, without in-depth discussion, to adequately appreciate the importance of this factor in determining the form taken by the symptoms of the illness. I can only confirm that an unconscious tendency to inversion is never absent; it is particularly useful in elucidating hysteria in men.*

b) It is possible to trace in the unconscious of psychoneurotics tendencies to every kind of anatomical extension of sexual activity, and to show that those tendencies are factors in the formation of symptoms. Among them we find occurring with particular frequency and intensity those in which the mucous membrane of the mouth and anus are assigned the role of genitals.

c) An especially prominent role in the formation of the symptoms of psychoneuroses is played by the partial drives, which appear for the most part in pairs of opposites and which we have come to know as conveyors of new sexual aims—the drive to obtain sexual pleasure from watching and exhibitionism, and the active and passive forms of the drive to cruelty. The contribution made by the latter forms is indispensable for understanding that the symptoms involve suffering; it almost invariably dominates a part of the patient’s social behavior. It is also through this connection between libido and cruelty that the transformation of love into hate takes place, as does the transformation of affectionate into hostile stirrings, which is characteristic of a great number of cases of neurosis, and indeed, it would seem, of paranoia in general.

The interest of these findings is heightened by certain additional special aspects of these facts.

α. Among the unconscious trains of thought found in neuroses, there is nothing corresponding to a tendency to fetishism—a circumstance which throws light on the psychological peculiarity of this well-understood perversion.

β. Whenever we find in the unconscious a drive of this sort, which is capable of being paired off with an opposite one, the second drive will regularly be found in operation as well. Every "active" perversion is thus accompanied by its passive counterpart: anyone who is an exhibitionist in his unconscious is at the same time also a voyeur; likewise, in anyone who suffers from the consequences of repressed sadistic stirrings, there is sure to be another contribution to the symptoms from the sources of masochistic inclinations. The complete correspondence with the mode in which the correlative "positive" perversions operate is certainly most remarkable. In the actual pathological symptoms, however, one or other of the opposing tendencies plays the predominant role.

γ. In a more pronounced case of psychoneurosis, it is rare to find a single one of these perverse drives in a developed form; we mostly find a greater number of them, and, as a rule, traces of them all. However, in its intensity, the individual perverse drive is independent of the formation of the others. Here, too, the study of the positive perversions provides us with an exact counterpart.

Partial Drives and Erogenous Zones

If we put together what we have learned from our investigation of the positive and negative perversions, it seems reasonable to trace them back to a number of *partial drives* which, though not of a primary nature, are open to further analysis. In addition to a "drive," which is not in itself sexual and which has its source in motor impulses, we can discern in the partial drives a contribution from an organ receiving stimuli (e.g., the skin, the mucous membrane, or a sense organ). An organ of this kind will be described here as an "erogenous zone"—as being the organ whose excitation lends the drive a sexual character. The part played by the erogenous zones is immediately obvious in the case of those inclinations to perversion that assign a sexual significance to the oral and anal orifices. These behave in every respect like a portion of the genital apparatus. In hysteria, these parts of the body and the tracts of mucous membrane

branching out from them become the seat of new sensations and of changes in innervation in ways quite similar to what happens to the actual genitals under the excitations of the normal genital processes.

The significance of the erogenous zones as accessory apparatuses and surrogates for the genitals is, among all the psychoneuroses, most clearly apparent in hysteria. But this is not to imply that this significance should be considered any less in the other forms of illness. It is only that in them it is less recognizable, because in their case (obsessional neurosis and paranoia), symptom formation takes place in regions of the psychic apparatus that are more remote from the particular centers concerned with control over bodily functions. In obsessional neurosis, what is more striking is the significance of those impulses that create new sexual aims and seem independent of erogenous zones. Nevertheless, in the sexual pleasure derived from watching, and in exhibitionism, the eye corresponds to an erogenous zone; while in the case of the component of the sexual drive which involves pain and cruelty, the same role is assumed by the skin, which in particular parts of the body has become differentiated into sense organs and modified into mucous membranes, and is thus the erogenous zone par excellence.*

Explanation of the Apparent Preponderance of Perverse Sexuality in the Psychoneuroses

The preceding discussion may perhaps have placed the sexuality of psychoneurotics in a false light. It may have given the impression that, owing to their disposition, psychoneurotics come close to perverts in their sexual behavior and are equally remote from normal persons. It may indeed very well be that the constitutional disposition of these patients, apart from an excessive degree of sexual repression and an excessive intensity of the sexual drive, includes among other things an unusual tendency to perversion in the widest sense. Nevertheless, investigation of less severe cases shows that this last assumption is not absolutely necessary, or at least that in assessing these pathological effects, there is a factor to be considered which would detract from this assumption. Most psychoneurotics fall ill only after the age of puberty, under the impact of the demands made upon them by normal sexual life. It is most particularly against normal sexual life that repression is directed. Or else illnesses of

this kind set in later, when the libido fails to obtain satisfaction along normal lines. In both these cases, the libido behaves like a stream whose main bed is being diverted; it proceeds to fill up collateral channels that may hitherto have remained empty. Thus, in the same way, what appears to be the strong tendency (though, it is true, a negative one) of psychoneurotics to perversion may be collaterally conditioned, and must, in any case, be collaterally intensified. The fact remains that we must put sexual repression as an internal factor alongside such external factors as limitation of freedom, inaccessibility of the normal sexual object, the dangers of the normal sexual act, et cetera, which bring about perversions in persons who might perhaps otherwise have remained normal.

In this respect, individual cases of neurosis may differ: in one case the more decisive factor may be the innate level of the tendency to perversion; in another it may be the collateral increase of that tendency owing to the diversion of the libido from the normal sexual aim and sexual object. It would be wrong to construe as opposition what is in fact a cooperative relation. Neurosis will always produce its greatest accomplishments when constitution and experience work together in the same direction. Where the constitution is a markedly developed one, it will perhaps not require the support of impressions of life; while a great shock in real life will perhaps bring about a neurosis even in an average constitution. Incidentally, these criteria apply equally to the etiological importance of what is innate and what is accidentally experienced, as it also has been identified in other fields.

If we prefer to assume, nevertheless, that a particularly strongly developed tendency to perversion is among the peculiarities of the psychoneurotic constitution, we have before us the prospect of being able to discern a variety of such constitutions according to the innate preponderance of one or another erogenous zone, or of one or another partial drive. The question as to whether a special relation holds between the perverse disposition and the choice of the particular form of illness has, like so much else in this field, not yet been investigated.

Reference to the Infantilism of Sexuality

By demonstrating the part perverse stirrings play in the formation of symptoms in the psychoneuroses, we have increased the number of people

who would count as perverts to quite an extraordinary level. Not only do neurotics themselves constitute a very numerous category of people, but the neuroses in all their manifestations, it must also be borne in mind, shade off in an uninterrupted series toward health. After all, Moebius could justifiably say that we are all a little hysterical. Thus the extraordinarily wide distribution of the perversions impels us to suppose that the disposition to perversions is itself nothing rare and special, but is bound to form a part of what passes for the normal condition.

It is, as we have seen, debatable whether the perversions go back to innate conditions or arise as a result of chance experiences, as Binet has shown for the case of fetishism. The conclusion now presents itself to us that there is indeed something innate lying at the basis of the perversions, but that it is *something innate in all human beings*, though as a disposition it may vary in its intensity and may lie dormant, waiting to be brought to the fore by life experiences. It concerns the innate, constitutional roots of the sexual drive. In one series of cases (the perversions), these roots may grow into the actual vehicles of sexual activity; in others they may be submitted to an insufficient suppression (repression) and thus be able in a roundabout way to attract a considerable proportion of sexual energy to themselves as symptoms; while in the most favorable cases, which lie between these two extremes, they may by means of effective restriction and other kinds of processing bring about what is known as normal sexual life.

However, we have to tell ourselves that the presumed constitution that contains the germs of all the perversions will only be demonstrable in children, even though in them it is only with modest degrees of intensity that any of the drives can emerge. A formula begins to take shape which suggests that the sexuality of neurotics has remained in, or has been brought back to, an infantile state. Thus our interest turns to the sexual life of children, and we will now proceed to trace the play of influences governing the development process of infantile sexuality till its outcome in perversion, neurosis, or normal sex life.

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Infantile Sexuality

Concerning the genital drive, part of popular opinion is that it is absent in childhood and only awakens in the period of life designated as puberty. This is not merely a simple error, but one that has had grave consequences, for it is mainly to this idea that we owe our present ignorance of the fundamental conditions of sexual life. A thorough study of the sexual manifestations of childhood would probably reveal to us the essential traits of the genital drive, the course of its development, and its composition from various sources.

Neglect of the infantile factor

It is noticeable that writers who concern themselves with explaining the characteristics and reactions of the adult individual have devoted so much more attention to the primeval period that is comprised in the life span of the individual's ancestors—have, that is, ascribed so much more influence to heredity—than to the other primeval period, which falls within the lifetime of the individual person—namely, to childhood. One would surely have supposed that the influence of this latter period would be easier to understand and could claim consideration before that of heredity. It is true that in the literature on the subject, one occasionally comes across remarks upon precocious sexual activity in small children—upon erections, masturbation, and even activities resembling coitus. But these are always noted only as exceptional events, as curiosities, or as horrifying instances of precocious depravity. No author has, to my knowledge, clearly recognized the regular incidence of a sexual drive in childhood, and in the writings on child development, so numerous these days, the chapter on "sexual development" is usually passed over.[14]

The reason for this curious neglect is to be sought, I think, partly in considerations of conventional propriety, to which the authors feel accountable as a result of their own upbringing, and partly in a psychical phenomenon that has itself hitherto eluded explanation. What I have in mind is the peculiar *amnesia* that hides from most people, though by no means all, the earliest beginnings of their childhood up to their sixth or eighth year. It has not hitherto occurred to us to feel any astonishment at the fact of this amnesia, though we might have had good reason for doing so. For we are told that during those years, of which we later recall nothing but a few incomprehensible fragments of memory, that we reacted vivaciously to impressions, that we knew how to express pain and joy in a human way, that we showed love, jealousy, and other passionate feelings by which we were strongly moved at the time, and indeed, that we said things which were noted by grown-ups as good evidence of insight and the beginnings of a capacity for judgment. And of all this we, as adults, have no knowledge of our own! Why does our memory lag so far behind our other psychical activities? We do, after all, have reason to believe that there is no period in human life at which the capacity for receiving and reproducing impressions is greater than precisely during the childhood years.[15]

On the other hand, we must assume, or we can convince ourselves by a psychological examination of others, that the very impressions that we have forgotten have nonetheless left the deepest traces in our psychic life, and have come to define all of our later development. There can, therefore, be no question of any real forgetting of childhood impressions; it is, rather, a matter of an amnesia similar to that which we observe neurotics exhibiting in relation to later experiences, and which is essentially defined by a simple withholding of these impressions from consciousness, that is to say, by their repression. But what are the forces that bring about this repression of childhood impressions? Whoever could solve this riddle would presumably have explained hysterical amnesia as well.

At any rate, we would not want to fail to emphasize that the existence of infantile amnesia provides a new point of comparison between the psychic states of children and those of psychoneurotics. We have already encountered another such point in the formula that impressed itself on us, to the effect that the sexuality of psychoneurotics has remained at, or been

led back to, the standpoint of the child. Could it be, after all, that infantile amnesia, too, is to be related to the sexual stirrings of childhood?

Incidentally, the connection between infantile and hysterical amnesia is more than a mere play of a joke. Hysterical amnesia, which serves the purpose of repression, becomes explicable only if the individual is already in possession of a store of memory traces which have been withdrawn from conscious disposal, and which are now, by an associative link, grabbing for themselves the material which the forces of repression are working to repel from consciousness. It may be said that without infantile amnesia, there would be no hysterical amnesia.

I believe, then, that infantile amnesia, which turns the childhood of each individual into something like a *prehistoric* past and screens from each one the beginnings of one's own sex life, is responsible for the fact that in general no importance is attached to childhood in the development of sexual life. No single observer can fill the gap in our knowledge that has arisen in this way. As early as 1896, I insisted on the significance of the childhood years for the origin of certain important phenomena dependent on sex life, and since then I have never ceased to emphasize the part played in sexuality by the infantile factor.

The Period of Sexual Latency in Childhood and Its Ruptures

The extraordinarily frequent findings of what are described as unruly and exceptional sexual stirrings in childhood, as well as the uncovering in neurotics of what have, until then, been unconscious memories of childhood, allow us to sketch out the sexual behavior of childhood in some such way as this:* it seems certain that the germs of sexual stirrings are already present in the newborn child and that these continue to develop for some time, but then become subject to a progressive process of suppression, which can itself be ruptured in turn by proper spurts of sexual development, and delayed by individual peculiarities. Nothing certain is known about the regularity and periodicity of this oscillating course of development. It seems, however, that the sexual life of children usually expresses itself in a form accessible to observation around the third or fourth year of life.[16]

Sexual inhibitions

During this period of total or only partial latency, those psychical forces are built up which later appear as obstacles in the path of the sexual drive and, like dams, restrict its flow—disgust, feelings of shame, and the claims of aesthetic and moral ideals. One gets the impression from culturally socialized children that the construction of these dams is the work of education, and no doubt education has much to do with it. But in reality this development is organically conditioned, and can occasionally generate itself without any help at all from education. Education will remain perfectly within its mandated domain if it limits itself to following the lines previously drawn organically, and imprinting them somewhat more clearly and deeply.

Sublimation

What is it that goes into the making of these constructions, which are so important for what is later to become an enculturated and normal individual? They probably emerge at the cost of the infantile sexual stirrings themselves. The influx of these stirrings does not cease even during this period of latency, though their energy is diverted, wholly or in great part, from their sexual application and directed to other purposes. Cultural historians appear to concur in assuming that powerful components are acquired for every kind of cultural achievement by this diversion of sexual driving forces from sexual aims, and their direction to new ones—a process deserving of the name of *sublimation*. To this we would add, correspondingly, that the same process plays a part in the development of the individual; we would move its beginning into the period of the sexual latency of childhood.*

We might also hazard an idea of the mechanism of this process of sublimation. On the one hand, it would seem that the sexual stirrings cannot be utilized during these childhood years, since the reproductive functions have been deferred—a fact which constitutes the main feature of the latency period. On the other hand, these impulses would seem in themselves to be perverse—that is, to arise from erogenous zones and be conveyed by drives which, in view of the direction of the individual’s development, could only arouse unpleasurable feelings. They consequently evoke opposing psychic forces which, in order to suppress this unpleasure

effectively, erect the psychical dams mentioned above: disgust, shame, and morality.

Breaches of the latency period

Without deceiving ourselves as to the hypothetical nature and insufficient clarity of our insights into the processes of the childhood period of latency or deferral, we want to return to firmer ground in pointing out that such a purposive course of infantile sexuality represents an educational ideal from which the development of the individual usually diverges at some point and often to a considerable degree. From time to time, a manifestation of sexuality, having evaded sublimation, may break through, or some sexual activity may persist through the whole duration of the latency period until the sexual drive erupts with greater intensity at puberty. Insofar as educators pay any attention at all to infantile sexuality, they behave exactly as though they shared our views as to the formation of the moral defensive forces at the expense of sexuality, and as though they knew that sexual activity makes a child unresponsive to education; for they persecute any sexual manifestations in children as "vices," without being able to do much against them. We, on the other hand, have every reason for turning our attention to these phenomena dreaded by education, for we may expect from them some insight into the original configuration of the genital drive.

The Manifestations of Infantile Sexuality

For reasons which will appear later, I shall take sensual sucking (sucking blissfully) as a model of the infantile sexual manifestations. (An excellent study of this subject has been made by the Hungarian pediatrician Lindner.)[17]

Sensual sucking

Sensual sucking, which appears in early infancy and may be continued into the early years of adulthood, or even persist throughout life, consists in rhythmically repeated sucking contact with the mouth (the lips), in which the purpose of food intake is excluded. A part of the lip itself, the tongue, or any other random part of the skin within reach—even the big toe—may be taken as the object upon which the sucking is carried out. In this

connection, a drive for clutching may appear, manifesting itself in a simultaneous rhythmic tugging at the ear lobes or in catching hold of some part of another person (of the ear, mostly) for the same purpose. Blissful sucking absorbs all attention, making the child either fall asleep or experience a motor reaction in a kind of orgasm.* It is not infrequently combined with rubbing some sensitive part of the body such as the breast or the external genitals. In this way, many children move from sensual sucking to masturbation.

No observer has as yet doubted the sexual nature of this activity. But in the face of this part of children's sexual activity, the best of the insights abstracted from adult sexuality are failing us. We only need to think of Moll's division of the sexual drive into the detumescence drive and the contrectation drive. The first of these (the detumescence drive) is not to be considered further here, and even the second one (the contrectation drive) can only be discerned with difficulty, as it features in Moll's later writings as the detumescence drive, described as being directed toward other persons.

Autoerotism

At this point, we are obliged to put the case differently. We will raise the most striking feature of this sexual activity, namely that the drive is not directed toward other persons, but obtains satisfaction from one's own body. It is *autoerotic*, to call it by a felicitous term introduced by Havelock Ellis.*

Furthermore, it is clear that the activity of a child who indulges in sensual sucking is determined by a quest for a pleasure experienced in the past and now recalled. In the simplest case, the child finds this satisfaction by sucking rhythmically at some part of the skin or mucous membrane. It is also easy to guess on what occasions the child had its first experiences of this pleasure that it now seeks to renew. It was the child's first and most vital activity, the sucking at the mother's breast, or at substitutes for it, that must have previously familiarized it with this pleasure. The child's lips, in our view, behaved like an *erogenous zone*; presumably the stimulation by the warm flow of milk was the cause of the pleasurable sensation. The satisfaction of the erogenous zone was probably associated, in the first instance, with the satisfaction of the need for nourishment. Anyone who has seen a baby sinking back satiated from the breast and

falling asleep with flushed cheeks and a blissful smile will have to come to the conclusion that this image persists as the expression of sexual satisfaction also in later life. The need for repeating the sexual satisfaction now becomes detached from the need for taking in food—a separation that becomes inevitable later, when the teeth appear and food is no longer taken in only by sucking, but also by chewing. The child does not make use of an extraneous body for sucking, but prefers a part of its own skin because it is more convenient, because it makes it independent of the external world, which it is not yet able to control, and because in that way it provides itself, as it were, with a second erogenous zone, albeit one of an inferior kind. The inferiority of this second zone is among the reasons why at a later date the child seeks the corresponding parts—the lips—of another person. (“It’s a pity I can’t kiss myself,” the child seems to be saying.)

Not all children engage in sensual sucking. It may be assumed that those children for whom, as a matter of their individual constitution, the erogenous significance of the zone of the lips is intensified end up sucking sensually. If that significance persists, these same children will, as grown-ups, become gourmets in kissing, will be inclined to perverse kissing, or, if males, will have a powerful motive for drinking and smoking. If, however, repression ensues, they will feel disgust at food and produce hysterical vomiting. Because of the twofold purpose of the zone of the lips, repression will extend to the nutritional drive. All of my women patients who suffer from eating disturbances, *globus hystericus*, constriction of the throat, and vomiting have indulged energetically in sensual sucking during their childhood years.

In considering sensual sucking or blissful sucking, we have already been able to note two essential characteristics of an infantile sexual manifestation. Such infantile sexual manifestation has as yet no sexual object, and is thus *autoerotic*; its sexual aim is dominated by an erogenous zone. We can anticipate that these characteristics will be found to apply to most of the other activities of the infantile sexual drive.

The Sexual Aim of Infantile Sexuality

Characteristics of erogenous zones

From the example of sensual sucking, we can glean still more about what it is that characterizes an erogenous zone. It is a region of the skin or mucous membrane in which stimulations of a certain sort evoke a feeling of pleasure of a particular quality. There can be no doubt that the stimuli which produce the pleasure are tied to special conditions, though we do not know what those are. A rhythmic character must play a part among them; the analogy with the stimulus evoked in tickling comes to mind. It seems less certain whether the character of the pleasurable feeling evoked by the stimulus should be described as a "specific" one—a specific quality containing the sexual factor. In matters of pleasure and unpleasure, psychology is still so much in the dark that the most cautious assumption is the one most to be recommended. We may later come upon reasons that would seem to support the idea that the pleasurable sensation does in fact possess a specific quality.

The erogenous quality can be attached to some zones of the body in a particularly marked way. There are predestined erogenous zones, as the example of sensual sucking shows. The same example, however, also shows us that any other random part of the skin or mucous membrane can take over the functions of an erogenous zone, and must therefore have some aptitude in that respect. Thus the quality of the stimulus has more to do with the production of the pleasurable sensation than has the nature of the zone of the body concerned. The child indulging in sensual sucking searches about its body and chooses some zone to suck blissfully, which then, through habit, becomes the preferred one; if it happens to hit upon one of the predestined zones (such as the nipples or genitals), this will no doubt remain the preference. A precisely analogous tendency to displacement will then reappear in the symptomatology of hysteria. In this neurosis, repression pertains most of all to the actual genital zones, and these transmit their susceptibility to stimulation to other erogenous zones (normally disdained in adult life), which then behave exactly like genitals. But besides this, precisely as in the case of sensual sucking, any other random zone of the body can become equipped with the excitability of the genitals, and can be elevated to an erogenous zone. Erogenous and hysterogenic zones show the same characteristics.

The infantile sexual aim

The sexual aim of the infantile drive consists in obtaining satisfaction by means of an appropriate stimulation of the erogenous zone that has been selected in one way or the other. The satisfaction must have been previously experienced in order to leave behind a need for its repetition, and we may expect that nature would have made sure not to leave this experience of satisfaction to chance. We have already learned about the arrangement that fulfills this purpose in the case of the zone of the lips: it is the simultaneous connection of this part of the body with the function of food intake. We shall come across other, similar arrangements as sources of sexuality. The state of the need for the repetition of satisfaction reveals itself in two ways: in a peculiar feeling of tension, which in itself has more of a sense of unpleasure about it, and in a sensation of itching or stimulation, which is *centrally conditioned* and projected onto the peripheral erogenous zone. We can therefore formulate the sexual aim in another way: it consists in replacing the projected sensation of stimulation in the erogenous zone by an external stimulus that abolishes that sensation by producing a sense of satisfaction. This external stimulus will usually consist in some kind of manipulation analogous to sucking.

The fact that the need can also be evoked peripherally, by a real modification of the erogenous zone, fully accords with our physiological knowledge. This strikes us as somewhat strange only because one stimulus seems to call for its abolition by another one that is located at the same spot.

Masturbatory Sexual Manifestations[18]

It can only come as a pleasant surprise to find that, once we have understood the nature of the drive arising from a single one of the erogenous zones, we shall have very little more to learn of the sexual activity of children that is of importance. The clearest distinctions pertain to the performance required for satisfaction; in the case of the labial zone, it consists of sucking, and this has to be replaced by other muscular actions according to the position and nature of the other zones.

Activity of the anal zone

Like the labial zone, the anal zone is, by its position, suited to act as intermediary for the attachment of sexuality to other bodily functions.

This part of the body should be thought of as being of major erogenous significance from the start. It is not without some astonishment that we learn from psychoanalysis of the transmutations normally undergone by the sexual excitations arising from this zone, and of the frequency with which it retains a considerable degree of susceptibility to genital stimulation throughout life. Intestinal catarrhs, so common during the childhood years, ensure that that zone is not without intense excitations. Intestinal catarrhs at a very early age make children “nervy,” as people say; in cases of later neurotic illness, they have a determining influence on the symptoms through which the neurosis is expressed, and they put at its disposal the whole range of intestinal disturbances. Taking into account the erogenous significance of the anus, which persists, at all events, in a modified form, we should not scoff at the influence of hemorrhoids, to which old-fashioned medicine used to attach so much importance in explaining neurotic conditions.

Children who are making use of the susceptibility to erogenous stimulation of the anal zone reveal themselves by holding back their stools until these accumulate to the point of being able to produce violent muscular contractions and intense stimulation to the mucous membrane as they pass through the anus. Such action must no doubt cause not only painful but also highly pleasurable sensations. One of the clearest signs of subsequent eccentricity or nervousness is seen when a baby stubbornly refuses to empty its bowels when placed on the pot—that is, at the beckoning of its caregiver—but chooses to exercise that function at its own whim. The child is naturally not intent on soiling its bed; it is only concerned not to miss the subsidiary gain in pleasure in defecating. Educators are once again correct when they describe children who hold the process back as “naughty.”

The retention of the fecal mass, which is at first deliberate, serving as a quasi-masturbatory stimulus to the anal zone, is incidentally one of the roots of constipation so common among neuropaths. The whole significance of the anal zone is then reflected in the fact that there are relatively few neurotics who do not have their special scatological practices, ceremonies, and so on, which they assiduously keep secret. Actual masturbatory stimulation of the anal zone by means of the finger, prompted by an itch that is either centrally determined or peripherally maintained, is by no means rare among older children.

Among the erogenous zones of the child's body, there is one which certainly does not play the primary role and which cannot be the vehicle of the oldest sexual stirrings, but which is destined for great things in the future. In both male and female children, it is brought into connection with urination (glans, clitoris); in the former, it is contained in a mucous sac, so that there can be no lack of stimulation by secretions prompting sexual excitation at an early stage. The sexual activities of this erogenous zone, which forms part of the genitals proper, are the beginning of what is later to become "normal" sex life.

The anatomical location of this zone, the secretions flooding it, the washing and rubbing involved in personal hygiene, and certain accidental excitations (such as the movement of intestinal worms in the case of girls) would ensure that the pleasurable feeling this part of the body is capable of producing would be noticed by children even during infancy, and would awaken a need for its repetition. If we survey the sum of these procedures, and consider that soiling something is bound to be similar in its effects to measures for keeping it clean, it is difficult to overlook nature's purpose: to establish, through early infantile masturbation (which scarcely a single individual escapes), the future primacy of these erogenous zones for genital activity. The action that assuages the stimulus and provides for satisfaction consists in a rubbing movement with the hand, or in the application of pressure (no doubt along the lines of a pre-existing reflex) in bringing the thighs together. The latter action seems to be the more primary one, and is by far the more common one in the case of girls. In boys, the preference for the hand already suggests the important contribution that the drive for mastery will later make toward masculine sexual activity.

Infantile masturbation seems to disappear at the onset of the latency period, but it may persist without interruption until puberty, and this would constitute the first great deviation from the course of development postulated for the enculturated human being. At some point in the childhood years after infancy, the sexual drive of this genital zone usually reawakens and persists again for some time until it is once more suppressed, or it continues without interruption. The possible conditions are very diverse and can only be explained through detailed analysis of individual cases. But all the details of this second phase of infantile sexual

activity leave the deepest traces in the (unconscious) memory of the person, determining the development of the character if that person remains healthy, and the symptomatology of the neurosis if that person falls ill after puberty. In the latter case, we find that this sexual period has been forgotten and that the conscious memories bearing witness to it have been displaced. (I have already mentioned that I am also inclined to relate normal infantile amnesia to this infantile sexual activity.) Psychoanalytic investigation enables us to make what has been forgotten conscious, and thus remove a compulsion arising from unconscious psychical material.

Return of infantile masturbation

The sexual excitation of infancy returns during the childhood years (more general time lines have not been determinable as yet), either as a centrally determined tickling itch which seeks satisfaction in masturbation, or as a process in the form of a nocturnal emission which, like the nocturnal emissions of adult years, achieves satisfaction without the help of any action by the subject. The latter case is the more frequent with girls and during the second half of childhood; its determinants are not entirely intelligible and often, though not invariably, it seems to be premised on a period of earlier *active* masturbation. The symptoms of these sexual manifestations are scanty; mostly it is the urinary apparatus that presents signs on behalf of the as yet undeveloped genital apparatus, as the latter's representative, so to speak. Most of the so-called bladder complaints of this period are sexual disturbances: *enuresis nocturna*, unless it represents an epileptic fit, corresponds to a nocturnal emission.

The reappearance of sexual activity is determined by internal causes and external occasions, both of which can be guessed, in cases of neurotic illness, from the form taken by their symptoms, and revealed with certainty by psychoanalytic investigation. I shall have to speak below of the internal causes; the accidental external occasions receive great and lasting importance at this stage. Chief among these is the influence of seduction, which prematurely treats a child as a sexual object and teaches it, under highly impressionable conditions, the satisfaction of the genital zones, which it is then usually compelled to repeat through masturbation. An influence of this kind may come either from adults or from other children. I cannot admit that I overestimated its frequency or significance in my 1896 paper on "The Aetiology of Hysteria," though I did not then

know that persons who remained normal might have had the same experiences in their childhood, and therefore I placed more emphasis on the significance of seduction than on the factors of sexual constitution and development.[19] Obviously seduction is not required for the awakening of the child's sexual life; such awakening can also come about spontaneously as a result of internal causes.

Polymorphously perverse disposition

It is an instructive fact that under the influence of seduction, children can become polymorphously perverse, and can be tempted to all possible kinds of transgressions. This shows that the child already carries an appropriate aptitude within its disposition; acting on such aptitude thus encounters little resistance, because, depending on the age of the child, the psychical dams against sexual excesses—shame, disgust, and morality—have either not yet been erected, or are still in the process of being formed. In this respect, the child is not behaving any differently from the average uncultivated woman in whom the same polymorphously perverse disposition persists. Under ordinary conditions, she may remain normal sexually, but if led on by a skillful seducer, she will develop a taste for every sort of perversion, and will retain it as part of her own sexual activities. Prostitutes exploit the same polymorphous, that is, infantile, disposition for the purposes of their profession; and, considering the immense number of women who are prostitutes or who must be supposed to have an aptitude for prostitution without actually engaging in it, it becomes impossible in the end not to recognize that this same disposition to perversions of every kind is a universal and primary human characteristic.

Partial drives

Moreover, the influence of seduction does not help to reveal the early history of the genital drive; it rather confuses our insight into it by presenting children prematurely with a sexual object for which the infantile sexual drive at first shows no felt need. It must, however, be admitted that infantile sexual life, even with the preponderance of dominant erogenous zones, also exhibits certain components which from the very first involve other people as sexual objects. Such are the drives to derive sexual pleasure from watching and exhibiting, and from cruelty,

which appear in integral relation with sexual life only later, but which become noticeable during childhood as strivings initially separate and independent from erogenous sexual activity. Above all, small children are without shame, and at certain periods of their earliest years show an unambiguous joy in exposing their bodies, highlighting the genitals in particular. The counterpart of this supposedly perverse inclination, curiosity to see other people's genitals, arises alongside this inclination only during later childhood years, when the obstacle of a sense of shame has already become fairly well developed. Under the influence of seduction, the perversion of watching can attain great importance for the sexual life of the child. But from my researches of the childhood years of healthy persons as well as neurotic patients, I must conclude that the drive for watching can also appear in children as a spontaneous sexual manifestation. Small children whose attention has once been drawn—mostly by masturbation—to their own genitals, usually take the further step without outside influences, and develop a lively interest in the genitals of their playmates. Since the opportunity for satisfying such curiosity usually arises only in the course of satisfying the two excremental needs, such children turn into voyeurs, eager spectators of the processes of passing urine and shit on the part of others. Once these inclinations have been repressed, the curiosity to see the genitals of others (whether of one's own or the opposite sex) persists as a tormenting urge, which in some cases of neurosis then affords the strongest driving force for the formation of symptoms.

In the child, the cruelty component of the sexual drive develops even more independently of the sexual activities otherwise attached to the erogenous zones. Cruelty generally comes easily to the childish character, since the inhibition that brings the drive for mastery to a halt before another person's pain—namely the capacity for compassion—develops relatively late. A thorough psychological analysis of this drive has, as we know, not yet been successfully undertaken. We may assume that cruel stirrings emanate from sources actually independent of sexuality, but they can combine at an early stage through anastomosis close to the point of their origins. Observation teaches us, however, that between sexual development and the development of the drives for watching and cruelty, there are mutual influences limiting the independence claimed for each of the two drives. Usually, children who distinguish themselves by special

cruelty toward animals and playmates justifiably give rise to the suspicion of intense and precocious sexual activity in the erogenous zones. Even if all the sexual drives are simultaneously precocious, erogenous sexual activity seems, nevertheless, to be primary. If the barrier of compassion falls away, there is a danger that this connection, forged in childhood, between the cruel and the erogenous drives may prove impossible to disentangle in later life.

Ever since Jean-Jacques Rousseau's *Confessions*, the painful stimulation of the skin of the buttocks is known to all educators as one of the erogenous roots of the passive drive to cruelty (masochism). From this, they have rightly deduced the postulate that corporal punishment, mostly applied to this part of the body, should be avoided in the case of those children whose libidos are susceptible to being forced into collateral channels by the requirements of cultural socialization enjoined at a later stage.

Sources of Infantile Sexuality

In the effort to trace the origins of the sexual drive, we have found so far that sexual excitation arises (a) as reproduction of a satisfaction experienced in connection with other organic processes; (b) through appropriate peripheral stimulation of erogenous zones; and (c) as an expression of certain "drives" whose origin we do not as yet fully understand, such as the drive for watching and the drive to cruelty. Psychoanalytic research, reaching back into childhood from a later time, together with the observation of children, shows us still other consistently flowing sources of sexual excitation. The observation of childhood has the disadvantage of working on data that are easily misunderstood; psychoanalysis is impeded by the fact that it can get to its objects, as well as its conclusions, only after long detours. But working in combination, the two methods can attain a sufficient degree of certainty in their findings.

In examining the erogenous zones, we had already found that these regions of the skin merely show a special heightening of a kind of susceptibility to stimulation belonging, to a certain degree, to the whole surface of the skin. We shall therefore not be surprised to find that very definite erogenous effects are to be ascribed to certain kinds of general

stimulation of the skin. Among these, we place particular emphasis on thermal stimuli, which may perhaps also help us to understand the therapeutic effect of warm baths.

Mechanical excitations

To this we must also add the production of sexual excitation by rhythmic mechanical vibrations of the body. Here we can distinguish three kinds of stimuli, which act, respectively, on the sensory apparatus of the vestibular nerves, on the skin, and on the deeper parts (e.g., the muscles and joints). Given the resulting sensations of pleasure—and it is worth emphasizing that here we can use the terms "sexual excitation" and "satisfaction" to a great extent without distinction, obliging us to seek an explanation further on—we can see proof of the pleasure generated by certain mechanical agitations of the body in that children are so fond of games of passive motion such as swinging and being thrown up into the air, incessantly demanding that that such games should be repeated.* It is well known that rocking is habitually used to induce sleep in restless children. The jerking motions experienced during a car journey, and later during a railway journey, have such a fascinating effect upon older children that at some point in their lives, all boys, at least, would have wanted to be a conductor or a coachman. They tend to take a puzzling interest of extraordinary intensity in things connected with railways and, at the age at which the production of fantasies is most active (shortly before puberty), make them the nucleus of a symbolism that is peculiarly sexual. A compulsive link of this kind between railway travel and sexuality clearly derives from the pleasurable character of the sensations of motion. In the subsequent event of repression, which turns so many childish preferences into their opposite, these same individuals will, as adolescents or adults, react to rocking or swinging with a feeling of nausea, or will tend to be terribly exhausted by a railway journey, or will tend to develop anxiety attacks on the journey and will protect themselves against a repetition of the painful experience by *railway anxiety*.

To this we must add the fact, which is not yet understood, that the coincidence of fright and mechanical agitation produces severe, hysteriform, traumatic neurosis. It may at least be assumed that these influences, which in small intensity become sources of sexual excitation,

lead to a profound disorder in the sexual mechanism if they operate with exaggerated force.

Muscle activity

It is well known that, for the child, extensive active muscle exercise is a need from whose satisfaction it draws extraordinary pleasure. Whether this pleasure has anything to do with sexuality, whether it does itself comprise sexual satisfaction, or whether it can become the occasion for sexual excitation—all of this may be subject to critical consideration, which could indeed also be directed against the position put forward in the preceding paragraphs, namely that the pleasure derived from sensations of passive motion is of a sexual nature or may be sexually exciting. It is a fact, though, that a number of people report that they experienced the first signs of excitement in their genitals while romping or wrestling with playmates, a situation in which, apart from general muscular exertion, there is extensive contact with the skin of the opponent. An inclination to muscular contest with a particular person, just as in later years an inclination to *verbal* dispute ("Those who love one another, tease one another"), is a sure sign that the object-choice is directed toward that person. We might recognize one of the roots of the sadistic drive in the enhancement of sexual excitation by muscular activity. For many individuals, the infantile connection between romping and sexual excitation becomes the determining factor in the direction of their genital drive, which later emerges as the preferential one.

Affective processes

Less subject to doubt are the other sources of sexual excitation in the child. It is easy to establish, whether by contemporary observation or by subsequent research, that all of the more intense affective processes, including even terrifying excitations, encroach upon sexuality—a fact which may incidentally help to explain the pathogenic effect of emotions of that kind. In the case of the school-going child, exam anxiety, or tension in the face of a difficult task, can become significant for the eruption of sexual manifestations, as well as for the pupil's attitude toward school. For quite often in such circumstances, a stimulus may occur which urges the child to touch its genitals, or a process akin to a nocturnal emission with all its bewildering consequences. The behavior of children at school, quite

puzzling enough for the teachers, deserves to be considered in relation to their budding sexuality. The sexually exciting impact of some inherently unpleasurable affects, such as feelings of being afraid, shuddering, or dreading, persists in a great number of people throughout even their adult lives, and probably explains why so many people seek opportunities for sensations of this kind, as long as certain accompanying conditions (such as those of belonging to an imaginary world, occurring in a book or in a play) temper the severity of the unpleasurable sensation.

If we assume that a similar erogenous effect attaches even to intensely painful sensations, especially when the pain is attenuated or kept at a distance by some accompanying condition, we should here have one of the main roots of the masochistic-sadistic drive, into whose diverse and composite nature we are very gradually gaining some insight.

Intellectual work

Finally, it is an unmistakable fact that the concentration of attention upon an intellectual task and intellectual strain in general produce a concomitant sexual excitation in many young people as well as in older people. This is no doubt the only justifiable basis for what is in other respects a highly questionable derivation of nervous disturbances from intellectual “overwork.”

If we now survey the investigations and suggestions, neither exhaustive nor complete, on the sources of infantile sexual excitation, the following general conclusions can be intuited or recognized. It seems that the fullest provisions are made for setting in motion the process of sexual excitation, the nature of which has admittedly become rather obscure to us. Directly or indirectly instrumental in this process are the excitations of the sensory surfaces—the skin and the sense organs—and most directly, the impact of stimuli on certain areas known as erogenous zones. The decisive element in these sources of sexual excitation is presumably the quality of the stimuli, though the factor of intensity, in the case of pain, is not a matter of complete indifference. But beyond these factors, there are arrangements in the organism which produce sexual excitation as a side effect in a great number of internal processes, as soon as the intensity of those processes has surpassed certain quantitative limits. What we have called the partial drives of sexuality are derived either directly from these internal sources of sexual excitation, or are composed of elements

contributed by those sources and by the erogenous zones. It may well be that nothing of importance occurs in the organism that does not contribute some component to the excitation of the sexual drive.

It does not seem to me possible at present to bring these general conclusions to any greater clarity or certainty, which I think is due to two factors: firstly, the novelty of the whole way of seeing, and secondly, the fact that the nature of sexual excitation is completely unknown to us. Nevertheless, I would not want to omit two observations that promise to open up wider vistas:

A. *Different sexual constitution*

Just as we saw previously that it was possible to derive a multiplicity of innate sexual constitutions from the variegated development of the erogenous zones, so we can now make a similar attempt by including the indirect sources of sexual excitation. We may assume that these sources contribute influxes in all individuals, though not equally strongly in all persons, and that in the privileged development of one or the other source of sexual excitation, an additional contribution would have been made to the differentiation of the various sexual constitutions.

B. *Pathways of mutual influence*

If we now drop the long-held figurative mode of expression of the "sources" of sexual excitation, we can get to the supposition that all the connecting pathways leading to sexuality from other functions must also be traversable in the reverse direction. If, for instance, the element common to the intake of food and to sexual satisfaction—namely the labial zone—is the reason why sexual satisfaction arises during food intake, it is that very element that renders explicable the disturbances in food intake if the erogenous functions of the common zone are disturbed. Once we know that concentration of attention may give rise to sexual excitation, it seems plausible to assume that by making use of the same path, but in reverse direction, the state of sexual excitation may influence the possibility of directing the attention. A good portion of the symptomatology of the neuroses, which I deduce from disturbances of the sexual processes, is expressed in disturbances of other, nonsexual, somatic functions; this effect, which has hitherto been unintelligible, becomes less

puzzling if it is taken to represent only the counterpart of the influences that bring about the production of sexual excitation.

But the same pathways along which sexual disturbances encroach upon the other somatic functions should also perform another important function in a state of health. They should serve to mobilize sexual driving forces for other than sexual aims—that is, for the sublimation of sexuality. We must conclude with the admission that although these paths certainly exist and can probably be traversed in either direction, very little is as yet known about them with any degree of certainty.

3

The Transformations of Puberty

With the arrival of puberty, changes set in that are supposed to lead infantile sexual life to its final, normal shape. The sexual drive has hitherto been predominantly autoerotic; it now finds the sexual object. Its activity had hitherto been impelled by individual drives and erogenous zones, which independently of one another sought a certain sort of pleasure as their sole sexual aim. Now there is a new sexual aim, for whose attainment all partial drives work together, while the erogenous zones become subordinated to the primacy of the genital zone. Since the new sexual aim assigns very different functions to the two sexes, their sexual development now diverges widely. That of the male is the more consistent and more easily accessible to our understanding, while that of the female actually undergoes a kind of regression. The normality of sex life is warranted solely by an exact convergence of the two currents directed toward the sexual object and the sexual aim. It is like the breakthrough of a tunnel driven through from both directions.

In men, the new sexual aim consists in the discharge of the genital products. It is by no means alien to the earlier one, the attainment of pleasure; rather, the highest degree of pleasure is attached to this final act of the sexual process. The sexual drive now puts itself at the service of the reproductive function; it becomes, so to say, altruistic. If this transformation is to succeed, the original dispositions and all the other characteristics of the drive must be taken into account in the process. Here too, as on any other occasion on which new connections and combinations leading to complicated mechanisms are to take place in the organism, there is an opportunity for pathological disturbances if these new

arrangements are prevented from developing. All pathological disturbances are rightly to be regarded as inhibitions of development.

The Primacy of the Genital Zones and Fore-Pleasure

The starting point and the final aim of the process that I have described are clearly visible. The intermediate steps are still in many ways obscure to us. We shall have to leave them with more than one of them an unsolved riddle.

The most striking of the processes at puberty has been identified as its most essential one: the manifest growth of the external genitals. By comparison, the latency period of childhood had expressed itself as a relative inhibition of growth. At the same time, the development of the internal genitals has advanced far enough for them to be able to supply the genital products or, as the case may be, to receive them in order to form a new living being. Thus a highly complicated apparatus has been completed, waiting to respond to the demands made upon it.

This apparatus is to be set in motion by stimuli; observation now shows us that stimuli can impinge on it from three directions: from the external world by means of the excitation of the erogenous zones, with which we are already familiar; from within the organism, along paths which we have still to explore; and from psychic life, which is itself a storehouse for external impressions and a reception area for internal excitations. All three directions produce the same effect, namely a condition described as “sexual excitement,” which shows itself by two kinds of indication, psychical and somatic. The psychical indication consists in a peculiar feeling of tension of an extremely compelling character; among the numerous somatic ones are first and foremost a number of changes in the genitals, which have an indubitable significance —that of readiness, or preparation, for the sexual act (the erection of the male organ and the moistening of the vagina).

Sexual tension

The fact that sexual excitement possesses the character of tension raises a problem whose solution would be as difficult as it would be important for understanding the sexual processes. In spite of all the differences of opinion on the subject prevailing in the field of psychology, I must insist

that a feeling of tension necessarily involves unpleasure. What is decisive to me is the fact that a feeling of this kind is accompanied by an urge to effect a change in the psychical situation, that it is impelling in a way wholly alien to the nature of the feeling of pleasure. If, however, the tension of sexual excitement is counted as an unpleasurable feeling, we are brought up against the fact that it is undoubtedly felt as pleasurable. In every case in which tension is produced by sexual processes, it is accompanied by pleasure; even in the preparatory changes in the genitals, a feeling of satisfaction of some kind is clearly apparent. What, then, is the connection between this unpleasurable tension and this feeling of pleasure?

Everything to do with the problem of pleasure and unpleasure touches upon one of the most sore points of present-day psychology. We shall try to learn as much as possible from the conditions of the present case, while avoiding any approach to the problem as a whole. Let us first cast a glance at the way in which the erogenous zones fit themselves into the new arrangement. They are assigned an important part in introducing sexual excitation. The eye, as the zone most remote from the sexual object and yet the most closely implicated in the conditions of wooing the object, is the one that is most likely to be stimulated by virtue of that special quality of excitation whose occasion we describe as beauty in the sexual object. For the same reason, the merits of a sexual object are described as "attractions." On the one hand, this stimulation is already accompanied by pleasure, while on the other hand, it leads to an increase of sexual excitement or produces it if it is not yet present. If an excitation is now added from another erogenous zone—for example, the tactile sensation of the hand—the effect is the same: a feeling of pleasure on the one hand, quickly intensified by the pleasure arising from the changes in the degree of preparedness, and on the other hand, an increase of sexual tension soon passing into the most clearly felt unpleasure if it is not permitted to accede to further pleasure. More transparent still, perhaps, is another case, if, for instance, an erogenous zone in a person who is not sexually excited (e.g., the skin of a woman's breast) is stimulated by touch. This touch already produces a pleasurable feeling, but at the same time, it is suited, better than anything else to arouse a sexual excitation that demands an addition of pleasure. The problem here is how it can come about that a feeling of pleasure can give rise to a need for greater pleasure.

The mechanism of forepleasure

The part played in this process by the erogenous zones, however, is clear. What is true of one of them is true of them all. They are all used to provide a certain amount of pleasure through the stimulation suited to them. This pleasure then leads to an increase in tension that, in its turn, has to raise the motor energy necessary to bring the sexual act to its conclusion. The penultimate stage of that act is once again the appropriate stimulation of an erogenous zone (the genital zone itself, around the glans penis) by the most appropriate object (the mucous membrane of the vagina); and from the pleasure yielded by this excitation, the motor energy is obtained, this time by a reflex path, which brings about the emission of the genital substances. This last pleasure is the highest in intensity, and differs in its mechanism from the preceding one. It is brought about entirely by relief: it is wholly a pleasure of satisfaction; with it, the tension of the libido temporarily subsides.

There seems to me to be some justification in using a different terminology to capture this difference between the kind of pleasure acquired through the stimulation of erogenous zones and the other kind, which accompanies the emptying of the sexual substances. The former may be suitably termed *fore-pleasure*, in contrast to the end-pleasure or pleasure of satisfaction derived from the sexual act. Fore-pleasure is thus the same pleasure that has already been yielded, although on a smaller scale, by the infantile sexual drive; end-pleasure is something new and is thus probably related to conditions that do not arise till puberty. The formula for the new function of the erogenous zones might now be expressed as follows: they are used to facilitate, through the medium of the fore-pleasure which can be derived from them (as it was during infantile life), the production of the greater pleasure of satisfaction.

I have recently been able to throw light upon another example, from a vastly different area of psychical dynamics, in which a greater effect of pleasure is similarly afforded by means of a less intense sensation of pleasure acting, as it were, as an incentive bonus. This also provided an opportunity to take a closer look at the nature of pleasure.[20]

Dangers of fore-pleasure

The connection between fore-pleasure and infantile sexual life is corroborated by the pathogenic role that can be assigned to it. The

attainment of the normal sexual aim can clearly be endangered by the mechanism in which fore-pleasure is involved. This danger arises if at any point in the preparatory sexual processes, the fore-pleasure turns out to be too great and the component of tension too small. The driving force for proceeding further with the sexual process then disappears, the whole path is cut short, and the preparatory action in question takes the place of the normal sexual aim. Experience has shown that the precondition of this damaging event is that the erogenous zone concerned or the corresponding partial drive would have already during childhood contributed to an unusual degree to the gain in pleasure. If further factors then come into play, tending toward fixation, a compulsion may easily arise in later life that resists the incorporation of this particular fore-pleasure into a new context. Such is in fact the mechanism of many perversions, which consist in lingering over the preparatory acts of the sexual process.

The failure of the function of the sexual mechanism owing to fore-pleasure is most easily avoided if the primacy of the genital zones, too, has already been prepared in childhood. And indeed, things seem actually arranged to bring this about during the second half of childhood (from the age of eight to puberty). During these years, the genital zones already behave in much the same way as in maturity; they become the seat of sensations of excitation and of preparatory changes whenever any pleasure is felt from the satisfaction of other erogenous zones, though this result is still without a purpose—that is to say, it contributes nothing to the continuation of the sexual process. Already in childhood, therefore, there arises, alongside the pleasure of satisfaction, a certain amount of sexual tension, albeit less constant and less intense. We can now understand why, in discussing the sources of sexuality, we were equally justified in saying both that the process in question was sexually satisfying and that it was sexually exciting. We become aware that on the path to gaining knowledge, we initially exaggerated the differences between infantile and mature sexual life, and we are now setting this right. Not only the deviations from normal sexual life, but also its normal formation, are determined by the infantile manifestations of sexuality.

The Problem of Sexual Excitation

We remain in complete ignorance both of the origin and of the nature of sexual tension arising simultaneously with pleasure in the process of the satisfaction of the erogenous zones.[21] The immediate assumption, that this tension arises somehow from the very nature of pleasure, is not only extremely improbable in itself, but becomes untenable when we consider that with the greatest pleasure, that which accompanies the emptying of the genital products, no tension is produced but, on the contrary, all tension is removed. Thus pleasure and sexual tension can only be connected in an indirect manner.

Role of the sexual substances

Apart from the fact that normally it is only the process of being relieved of the sexual substances that brings sexual excitation to an end, there are other indications of a connection between sexual tension and the sexual substances. In a continent life, the genital apparatus tends, at varying but not random intervals, to rid itself of the sexual substances during the night, accompanied by a pleasurable feeling, in the course of a dream hallucinating a sexual act. And in regard to this process (nocturnal emission), it is difficult to refute the view that the sexual tension, which succeeds in making use of the shortcut of hallucination as a substitute for the act itself, is a function of the accumulation of semen in the vesicles containing the genital products. Experience tells us something similar about the exhaustibility of the sexual mechanism. If the store of semen is emptied, not only does it become impossible to carry out the sexual act, but the erogenous zones, unable to evoke any pleasure even with appropriate excitation, fail to respond to stimulation. We thus learn incidentally that a certain degree of sexual tension is required even for the excitability of the erogenous zones.

Thus one would be impelled to adopt what is, if I am not mistaken, a fairly widespread hypothesis, namely that it is the accumulation of the sexual substances that creates and maintains sexual tension; the pressure of these products upon the walls of the vesicles containing them might be supposed to act as a stimulus upon a spinal center, whose condition would be perceived by higher centers, and would then give rise to what is for consciousness the familiar sensation of tension. If the excitation of the erogenous zones heightens sexual tension, this could only come about through a process whereby the erogenous zones are linked with these

centers in an anatomically preformed connection, raising the tonus of excitation and, under conditions of sufficient sexual tension, setting the sexual act in motion, or, under conditions of insufficient sexual tension, stimulating the production of genital substances.

The weakness of this theory, which has found acceptance, for instance, in Krafft-Ebing's description of the sexual processes, lies in the fact that, having been designed to account for the genital activity of adult men, it takes too little account of three sets of conditions which it should also be able to explain. These are the conditions pertaining to children, women, and castrated men. In none of these three cases can there be any question of an accumulation of genital products in the same sense as in the case of men, which is what makes the straightforward application of the theory difficult. Nevertheless, we should admit without reservation that it is possible to find information that would show how the theory could cover these cases as well. In any case, we should be cautious not to expect the factor of the accumulation of the genital products to shoulder more of an explanatory burden than it can bear.

Over-estimation of the internal genitals

Observations on castrated men have shown that sexual excitation can occur to a considerable degree independently of the production of genital substances. The operation of castration occasionally fails to bring about a limitation of libido, although such limitation, which provides the motive for the operation, is the usual outcome. It is therefore by no means as astonishing, as C. Rieger makes it out to be, that the loss of the male sex glands in an older individual may have no further effect upon his psychical behavior. For the sex glands do not constitute a person's sex, and observation of castrated men merely confirms what had been shown long before by removal of the ovaries—namely that it is impossible to obliterate the characteristics of the sex by removing the sex glands. It is true that castration performed at a tender age, before puberty, effectively tends to obliterate the characteristics of the male sex; it seems, though, that what is in question here is not the actual loss of the sex glands, but an inhibition (connected with that loss) in the development of other factors.

Chemical theory

The truth is that we can give no information on the nature of sexual excitation, especially since (having found that the importance of the sex glands in this respect has been overestimated) we do not know to which organ or organs a person's sex is attached. After the surprising discoveries of the important part played by the thyroid gland in sexuality, we may assume that we are still ignorant of the essential factors of a person's sex. Anyone who feels the need for a provisional hypothesis to fill this wide gap in our knowledge may well take as a starting point the powerful substances that have been found in the thyroid gland, and may proceed along some of the following lines. It may be supposed that, as a result of an appropriate stimulation of erogenous zones, or of other circumstances giving rise to an onset of concomitant sexual excitation, some substance that is disseminated generally throughout the organism becomes decomposed and the products of its decomposition issue in a specific stimulus acting on the reproductive organs or the spinal center related to them. We are already familiar with the fact that other toxic substances, introduced into the body from outside, can bring about a similar transformation of a toxic stimulus into a stimulus acting on a particular organ. The question of what interplay arises in the course of the sexual processes between the effects of purely toxic stimuli and of physiological ones cannot be treated, even hypothetically, in the present state of our knowledge. I might add that I attach no importance to this particular hypothesis and should be ready to abandon it at once in favor of another, provided that its fundamental nature remains unchanged—that is, the emphasis placed upon sexual chemistry. For this apparently arbitrary supposition is supported by an insight that has received little attention but deserves the closest consideration: the neuroses that can only be traced back to disturbances of sexual life show the closest clinical similarity to the phenomena of intoxication and abstinence that arise from the habitual use of pleasure-producing toxins (alkaloids).

Differentiation between Men and Women

We know that it is not until puberty that a sharp distinction is established between the characteristics of the male and the female sex—an opposition which then has an influence more decisive than any other upon the ways in which humans give shape to their lives. It is true that male and female

dispositions are easily discernible even in childhood. The development of the inhibitions concerning sexuality (shame, disgust, compassion, etc.) takes place earlier in little girls, among whom it encounters less resistance than among boys. Among girls, the tendency to sexual repression generally appears greater, and where the partial drives of sexuality become apparent, they tend to take the passive form. The autoerotic activity of the erogenous zones, however, is the same in both sexes, and because of this uniformity, the possibility of a difference between the sexes, such as it is established after puberty, is not a factor in childhood. Concerning the autoerotic and masturbatory manifestations of sexuality, we might posit the proposition that the sexuality of little girls is entirely masculine in character. Indeed, if we were able to give a more definite content to the concepts of "masculine" and "feminine," we might with some justification maintain that the *libido is regularly and invariably masculine in nature, whether it occurs in men or in women, and irrespective of whether its object is a man or a woman*.

Since I have become acquainted with the consideration of bisexuality (through W. Fliess), I regard it as the decisive factor in this respect; without taking bisexuality into account, I think, one would hardly be able to arrive at an understanding of the sexual manifestations actually to be observed in men and women.

Leading zones in men and women

Apart from this, I have only the following to add. The leading erogenous zone in female children is located at the clitoris, and is thus homologous to the male genital zone at the glans penis. Everything I have been able to find out about masturbation in little girls has related to the clitoris and not to the parts of the external genitals important for later genital functions. I even doubt that a female child can, under the influence of seduction, get to anything other than clitoral masturbation—apart from certain rare exceptional cases. The spontaneous discharges of sexual excitement, so frequent precisely in little girls, manifest themselves in spasms of the clitoris. Frequent erections of that organ make it possible for girls to correctly assess the sexual manifestations of the other sex, even without instruction, by simply transferring the sensations of their own sexual processes onto boys.

If we are to understand how a little girl becomes a woman, we must pursue the further vicissitudes of this excitability of the clitoris. Puberty, which brings about so great a thrust of libido in boys, is marked in girls by a fresh wave of repression, which particularly affects clitoral sexuality. What thus succumbs to repression is a piece of masculine sexual life. The intensification of sexual inhibitions brought about by pubertal repression in women generates a stimulus for the man's libido, urging it to intensify its efforts. As the level of the libido rises so, too, does the sexual overvaluation, which becomes available in full measure only for the woman who holds herself back and denies her sexuality. When at last the sexual act is allowed to proceed, and the clitoris itself becomes excited, it retains the function of passing the excitation on to the adjacent female parts, just as pine shavings can be kindled to set a log of harder wood on fire. To effect this transfer often takes a certain amount of time, during which the young woman is anesthetic. This anesthesia may persist if the clitoral zone refuses to pass on its excitability, which is precisely what extensive activity of that zone during childhood prepares it to do. It is well known that anesthesia in women is often only apparent and local. They experience loss of sensation at the vaginal entrance, but this does not mean that they cannot feel excitement originating in the clitoris or even in other zones. To these erogenous factors of anesthesia are then added psychical determinants, which also arise under conditions of repression.

If the erogenous susceptibility to stimulation has been successfully transferred from the clitoris to the vaginal orifice, the woman would have changed the leading zone for her later sexual activity. A man, on the other hand, retains his leading zone unchanged from childhood. In this change of their leading erogenous zone, and in the wave of repression at puberty, which, as it were, puts aside their infantile masculinity, lie the chief conditions for the greater proneness of women to neurosis and especially to hysteria. These conditions are thus integrally related to the essence of femininity.

The Finding of an Object

While the primacy of the genital zones is established by the processes at puberty, and the man's erect member points imperiously toward its new sexual aim, that of penetrating the bodily cavity which excites his genital

zone, the process of finding an object, prepared for since the earliest stages of childhood, takes place on the psychical side. At a time at which the first sexual satisfaction was still linked to the intake of food, the sexual drive had a sexual object outside the infant's own body—the mother's breast. It was only later that the drive lost that object, just at the time, perhaps, when the child was able to form an overall idea of the person to whom the organ affording it satisfaction belonged. As a rule, the sexual drive then becomes autoerotic, and only after the latency period has been surmounted is the original relation restored. It is not without good reason that the sucking of the child at the mother's breast has become the model of every loving relationship. The finding of an object is in fact a re-finding of it.

The sexual object during infancy

However, even after sexual activity has become detached from food intake, an important part of this first and most significant of all sexual relations survives, which helps to prepare for the choice of an object, and thus to restore the lost bliss. Throughout the entire period of latency, the child learns to love other people who help it in its helplessness and satisfy its needs—a love on the model and in continuation of the relationship of the infant to its nursing caregiver. One may be disinclined to identify the child's tender feelings and high regard for its caregivers with sexual love. But I think that a closer psychological examination may make it possible to establish this identity beyond any doubt. A child's contact with its caregiver affords it an unending source of sexual excitation and satisfaction emanating from its erogenous zones. This is especially so since the caregiver—the mother, as a rule—herself bestows upon the child feelings derived from her own sexual life: she strokes it, kisses it, rocks it, and quite clearly treats it as a substitute for a fully fledged sexual object.[22] The mother would probably be horrified if she were made aware that all her caresses were rousing her child's sexual drive and preparing for its later intensity. She regards what she does as asexual, "pure" love, since after all, she carefully avoids adding more excitations to the child's genitals than are unavoidable in nursery care. As we know, however, the sexual drive is not aroused only by direct excitation of the genital zone. What we call affection will, without fail, one day show its effect on the genital zones as well. Moreover, if the mother understood more of the

drive's great significance for psychic life as a whole—in all its ethical and psychical achievements—she would spare herself all self-reproaches even after this had been explained to her. She is only fulfilling her duty in teaching the child to love. After all, the child is meant to grow into a competent person with vigorously felt sexual needs, and to accomplish in life all the things that human beings are impelled to do by their drives. It is true that an excess of parental affection will become harmful in accelerating sexual maturity and also, by "spoiling" the child, make it incapable in later life of temporarily doing without love, or of being satisfied with less of it. One of the clearest indications of later nervousness is to be seen in an insatiable demand for the parents' affection. On the other hand, neuropathic parents, who are inclined as a rule to display excessive affection, are precisely those who are most likely to arouse the child's disposition to neurotic illness by their caresses. Incidentally, this example shows that there are ways more direct than inheritance by which neurotic parents can transfer their disturbance to their children.

Infantile anxiety

Children themselves behave from an early age as though their affectionate ties to their caregivers were in the nature of sexual love. Anxiety in children is originally nothing but an expression of the fact that they are missing the person they love. It is for this reason that they are fearful upon encountering any stranger. They are afraid in the dark because in the dark they cannot see the person they love, and they can be calmed down if they can take hold of that person's hand in the dark. To blame childhood terrors and frightening nursery tales told by caregivers for making children anxious is to overestimate their effect. Children who tend to be anxious are affected by such stories which would make no impression whatever upon others; and only children whose sexual drive is excessive or prematurely developed, or who have become demanding due to pampering, tend to be anxious. In this respect, a child turning its libido into anxiety when it cannot satisfy it behaves like an adult. Conversely, an adult who has become neurotic due to unsatisfied libido will behave in anxiety like a child: that person will become fearful as soon as he or she is alone, that is to say, without someone of whose love he or she had felt assured, and will seek to assuage this anxiety by the most childish of measures.[23]

If the parents' affection for their child has successfully managed to avoid prematurely (i.e., before the somatic conditions of puberty are present) awakening its sexual drive to such a degree that psychical excitation unmistakably breaks through to the genital system, their affection will be able to perform its task of guiding this child in its choice of a sexual object when it reaches maturity. Certainly the most natural thing for the child to do would be to choose as sexual objects the very persons whom it has loved since childhood with what may be called attenuated libido. But because of the postponement of sexual maturity, time has been gained to erect the barrier against incest along with the other sexual inhibitions, and to take in the moral precepts which expressly exclude blood relations—that is, the persons loved in childhood—from object-choice. Heeding this barrier is above all a cultural demand of society, which must defend itself against the family sapping those interests which it needs to establish greater social units; for this reason, it seeks by all possible means to loosen the tie with the family, all-important during childhood, in the case of every individual, but especially in that of the young man.

It is in the imagination, however, that the choice of an object is accomplished at first, and the sex life of adolescence is almost entirely restricted to indulging in fantasies, that is, in ideas not destined to be carried into effect. In these fantasies, in all human beings, the infantile inclinations invariably reappear, but now with somatically intensified pressure. With regular frequency, the primary inclination is the child's sexual stirring toward the parents, which is mostly already differentiated owing to the attraction of the opposite sex—the son being drawn toward the mother and the daughter toward the father.* At the same time as these clearly incestuous fantasies are overcome and repudiated, one of the most significant, but also one of the most painful, psychical achievements of the pubertal period is completed: the detachment from the authority of the parents, a process that in the first place establishes the opposition between the new generation and the old that is so important for cultural advancement. At every stage in the course of development through which all human beings have to pass, a certain number of them are held back, so there are some who have never managed to get over their parents' authority and have withdrawn their affection from them either very incompletely or not at all. They are mostly girls who, to the delight of

their parents, have persisted in all their child-like love far beyond puberty. It is most instructive to find that these girls, once they get married, lack the capacity to give their husbands what is due to them; they make cold wives and remain sexually anesthetic. We learn from this that both what appears to be nonsexual love for parents and genital love are nurtured from the same sources; the former, that is to say, merely corresponds to an infantile fixation of the libido.

The closer one approaches the deeper disturbances of psychosexual development, the more unmistakably the importance of incestuous object-choice emerges. In psychoneurotics, psychosexual activity in finding an object remains, in large part or entirely, in the unconscious, as a result of their repudiation of sexuality. Girls with an excessive need for affection and an equally exaggerated horror of the real demands of sexual life develop an irresistible temptation on the one hand to realize the idea of asexual love in their lives, and on the other hand to conceal their libido behind an affection which they can express, without self-reproach, by clinging on to their infantile fondness, revived at puberty, for their parents or brothers and sisters throughout their lives. Psychoanalysis can easily show such persons that they are *in love*, in the common understanding of the word, with these blood-relations of theirs, for, with the help of their symptoms and other pathological manifestations, it traces their unconscious thoughts and translates them into conscious ones. In cases in which someone who had previously been healthy has fallen ill after an unhappy experience in love, it is also possible to show with certainty that the mechanism of such illness consists in a turning-back of the libido on to persons preferred in infancy.

Aftereffects of infantile object-choice

Even a person who has been fortunate enough to avoid an incestuous fixation of the libido does not entirely escape its influence. It is clearly an echo of this phase when, as so often happens, a young man falls in love seriously for the first time with a mature woman, or a girl with an elderly man vested with authority; these figures are able to revive for them the images of their mother and father. We can assume that any and every object-choice is based, though less closely, on these prototypes. A man, especially, seeks after the image of his mother as it has prevailed in his memory since the earliest childhood; accordingly, if his mother is still

alive, she may well resent this new version of herself and meet her with hostility. In view of the importance of a child's relations to the parents in determining the later choice of a sexual object, it is not difficult to understand that any disturbance of those relations established during childhood will produce the gravest consequences for adult sexual life. The lover's jealousy never lacks an infantile root or at least an infantile reinforcement. Quarrels between the parents themselves, or an unhappy marriage between them, form conditions for the most severe predisposition for disturbances of sexual development or neurotic illness among their children.

Infantile affection for the parents is no doubt the most important, but not the only one of the traces which, having been revitalized at puberty, points the way for the object-choice. Other starting points with the same early origin enable a man to develop more than one *sexual series*, no less based upon his childhood, and to form highly varied conditions for his object-choice.

Prevention of inversion

One of the tasks implicit in the object-choice is that it should not miss the opposite sex. This, as we know, is not accomplished without a certain amount of fumbling. Often enough, the first stirrings after puberty go awry, though without any lasting harm. Dessoir has rightly remarked upon the regularity with which adolescent boys and girls form sentimental friendships with others of their own sex. No doubt the strongest force working against a permanent inversion of the sexual object is the attraction that the opposing characteristics of the sexes exercise upon one another. Nothing can be said within the framework of the present discussion to throw light upon it. However, this factor is not in itself sufficient to exclude inversion; there are no doubt a variety of other contributing factors. Chief among these is society's authoritative inhibition of inversion. Where it is not regarded as a crime, it will be found that it answers fully to the sexual inclinations of no small number of people. It may further be presumed that in the case of men, a childhood recollection of the affection shown them by their mother and other female persons to whose care they were entrusted as children contributes powerfully to directing their choice toward women; while in the case of girls, who in any case enter a period of repression at puberty, stirrings of

rivalry contribute to discouraging them from loving members of their own sex. The education of boys by male persons (slaves in antiquity) seems to encourage homosexuality. The frequency of inversion among the present-day aristocracy is made somewhat more explicable by their employment of male servants, as well as by the fact that their mothers give less personal care to their children. In the case of some hysterics, it is found that the early loss of one of their parents, whether by death, divorce, or estrangement, with the result that the remaining parent attracts all of the child's love, determines the sex of the person later to be chosen as a sexual object, and may thus open the way to a persisting inversion.

Summary

The time has arrived to attempt a summary. We started out from the aberrations of the genital drive with respect to its object and its aim; we were faced by the question as to whether these arise from an innate disposition, or whether they are acquired as a result of experiences in life. The answer to this question arose from an insight gained on the basis of psychoanalytic investigation into the workings of the genital drive among psychoneurotics, a numerous category of persons who are not far removed from healthy persons. We found in these persons tendencies to every kind of perversion, detectable as unconscious forces and as factors involved in the formation of symptoms. We could thus say that neurosis is, as it were, the negative of perversion. Recognizing the widespread tendencies to perversion, we were led to the view that a disposition to perversions is an original and universal disposition of the human genital drive and that normal sexual behavior is developed out of it as a result of organic changes and psychical inhibitions occurring in the course of maturation. We hoped to be able to show the presence of this original disposition in childhood. Among the forces restricting the direction taken by the sexual drive we stressed shame, disgust, compassion, and the social constructions of morality and authority. We were thus led to regard any established aberration from normal sex life as an instance of inhibition of development, and of infantilism. We had to move the importance of the variations in the original disposition into the foreground, and assume a cooperative and not an opposing relation between them and the influences of actual life. At the same time, it seemed to us that, since the original

disposition is necessarily a complex one, the genital drive itself must be something composed of various factors which, in the perversions, falls apart, as it were, into its components. The perversions were thus seen to be inhibitions on the one hand, and dissociations of normal development on the other hand. Both these aspects converged in the supposition that the genital drive of adults arises from a combination of multiple stirrings from childhood, a striving with a singular aim.

Having come to think of the perverse tendencies in terms of a collateral filling of subsidiary channels when the main current of the stream has been redirected by "repression," we added the explanation for the predominance of perverse tendencies in psychoneurotics, and then proceeded to consider sexual life in childhood. We found it regrettable that the sexual drive in childhood has been denied, and that the sexual manifestations not infrequently observed in children have been described as irregularities. It seemed to us, rather, that children come into the world with germs of sexual activity, that they enjoy sexual satisfaction along with food intake from the earliest stage, and that they persistently seek to repeat the experience in the familiar activity of "sensual sucking." However, the sexual activity of children does not appear to develop at the same pace with other functions, but first enters into the so-called period of latency. During that period, the production of sexual excitation seems not by any means discontinued, but only halted; it presumably supplies a store of energy employed for the most part for purposes other than sexual—contributing the sexual components to social feelings on the one hand, and (through repression and reaction-forming) to the erection of the subsequently developed barriers against sexuality on the other. In accordance with this view, the forces designed to keep the sexual drive on certain tracks are built up in childhood with the help of education, chiefly at the cost of mostly perverse sexual stirrings. Another part of the infantile sexual impulses would seem to evade these uses and succeed in expressing itself as sexual activity. It would then turn out that sexual excitation in children springs from a multiplicity of sources. Satisfaction arises first and foremost from the appropriate sensory excitation of what we have described as erogenous zones; any part of the skin and any sense organ could probably function as an erogenous zone, though there are certain privileged erogenous zones whose excitation would seem to be secured from the very first by certain organic configurations. It further appears

that sexual excitation arises as a by-product, as it were, of a large number of processes in the organism as soon as they reach a certain degree of intensity, and especially in all of the more intense emotional upheavals, even if they are of a distressing nature. The excitations from all these sources would not yet be combined at that stage, but it would seem that each follows its own separate aim, which is merely the attainment of a certain sort of pleasure. In childhood, therefore, the sexual drive is without an object, that is, *autoerotic.*

The erogenous zone of the genitals begins to make itself noticeable, it seems, even during the years of childhood either by yielding satisfaction in response to appropriate sensory stimulation, like any other erogenous zone, or by producing, in a manner not fully understood, satisfaction derived from other sources, in tandem with a sexual excitation that attains a special relation to the genital zone. We were reluctantly obliged to admit that we could not satisfactorily explain the relationship between sexual satisfaction and sexual excitation, nor that between the activity of the genital zone and the other sources of sexuality.

It was not possible to say what measure of sexual activity can occur in childhood without being described as abnormal or detrimental to further development. The nature of these sexual manifestations was found to be predominantly masturbatory. Experience further showed that the external influences of seduction can provoke premature breaches of the latency period or even its cessation, and that the genital drive of children proves in fact to be polymorphously perverse; it seems, moreover, that any such early sexual activity diminishes a child’s responsiveness to education.

In spite of the gaps in our insights into infantile sexual life, we had to proceed with the attempt of examining the alterations brought about in it by the arrival of puberty. We selected two of these as being the decisive ones: the subordination of all the other sources of sexual excitation under the primacy of the genital zones, and the process of finding an object. Both of these are already preformed in childhood. The first is accomplished by taking advantage of the mechanism of fore-pleasure: what were formerly self-contained sexual acts, attended by pleasure and excitation, become acts preparatory to the new sexual aim—the emptying of the genital products—the attainment of which, enormously pleasurable, brings the sexual excitation to an end. In this connection, we had to take into account the differentiation of sex between man and woman, and we found that in

order to become a woman, a further process of repression is required, which discards a portion of infantile masculinity and prepares the woman for changing the leading genital zone. With regard to object-choice, we found that it is given its direction by the infantile indications, revived at puberty, of the child's sexual inclination toward its parents and caregivers, but that this is diverted from them to other people resembling them, owing to the incest barrier erected in the meantime. Finally, it must be added that during the transition period of puberty, the processes of somatic and of psychical developments continue for a time side by side independently, until the irruption of an intense psychical stirring of love, leading to the innervation of the genitals, brings about the unity of the love function that is normally required.

Factors interfering with development

Every step along this long developmental path can become a point of fixation; every juncture in this intricate composition can turn into an occasion for a dissociation of the genital drive, as we have shown before in numerous instances. It remains for us to give an overview of the various factors, internal and external, which interfere with development, and to indicate at which point in the mechanism the disturbance arising from these factors impinges. The factors that we shall enumerate can evidently not all be of equal importance, and we must be prepared for difficulties in assigning an appropriate estimation of each.

Constitution and heredity

First and foremost, we must name the innate *diversity of the sexual constitution*, upon which the principal weight probably falls but which can understandably only be inferred from its later manifestations, and even then not always with great certainty. We picture this diversity as a preponderance of one or another of the multiple sources of sexual excitation; it is our view that a difference in disposition of this kind is always bound to find expression in the final result, even though that result may not overstep the limits of what is normal. It is certainly conceivable that there may also be variations in the original disposition of a kind that must necessarily, and without the occurrence of any other factors, lead to the development of an abnormal sexual life. These might be described as "degenerative," and be regarded as an expression of inherited

deterioration. In this connection, I have a remarkable fact to record. In more than half of the severe cases of hysteria, obsessional neurosis, et cetera, which I have treated psychotherapeutically, I have been able to prove with certainty that the patients' fathers had suffered and recovered from syphilis before marriage, whether they had been suffering from tabes or general paralysis, or whether the anamnesis indicated in some other way the presence of syphilitic disease. I should like to explicitly state that the children who later became neurotic bore no physical signs of hereditary syphilis, so it was their abnormal sexual constitution that was to be regarded as the last vestige of their syphilitic inheritance. Though I am far from wishing to present descent from syphilitic parents as an invariable or indispensable etiological condition of a neuropathic constitution, I nevertheless regard the coincidence that I have observed as neither accidental nor insignificant.

The hereditary conditions in the case of positive perverts are less well known, for they know how to escape investigation. Yet there are good reasons to suppose that what is true of the neuroses is similar to what applies to the perversions. For it is not rare to find perversions and psychoneuroses occurring in the same family, distributed between the different sexes in such a way that the male members of the family, or one of them, are positive perverts, while the females, in accordance with the tendency of their sex toward repression, are negative perverts, that is, hysterics. This is good evidence of the essential connections between the two disturbances.

On the other hand, the position that the form to be taken by one's sex life is unambiguously decided with the first settings of the different components of the sexual constitution is untenable. Rather, the conditioning process continues, and further possibilities arise according to the vicissitudes of the influxes of sexuality springing from separate sources. This *further processing* is clearly what issues in the decisive result, whereas constitutions of similar description can lead to three different final outcomes. If the relation between all the different dispositions—a relation that we will assume to be abnormal—persists and grows stronger at maturity, the result can only be a perverse sexual life. The analysis of abnormal constitutional dispositions of this kind has not yet been properly tackled, but we already know cases that can easily be explained by such assumptions. Writers on the subject think, for instance,

that the necessary precondition for a whole number of perverse fixations lies in an innate weakness of the sexual drive. In this form, this position seems to me untenable; it makes perfect sense, however, if what is meant is a constitutional weakness of one particular factor in the sexual drive, namely the genital zone—a zone which later takes over the function of combining the individual sexual activities for the purpose of reproduction. For if the genital zone is weak, this combination, which is required to take place at puberty, is bound to fail, and the strongest of the other components of sexuality will prevail in its activity as perversion.

Repression

A different outcome is brought about if, in the course of development, some of the components—those of excessive strength in disposition—are submitted to the process of *repression* (which, it must be insisted, is not equivalent to their abolishment). If this happens, the excitations concerned continue to be generated in the usual way, but they are psychically prevented from attaining their aim and are forced into numerous other channels till they have found expression in symptoms. The outcome may be an approximately normal sexual life—though usually a restricted one—but one complemented by psychoneurotic illness. These cases especially have become well known to us through the psychoanalytic investigation of neurotics. The sexual life of such persons begins like that of perverts, and a considerable part of their childhood is spent with perverse sexual activity that occasionally extends far into maturity. A reversal due to repression then occurs owing to internal causes (usually before puberty, but now and then even long afterward), and from that time onward, neurosis takes the place of perversion, without extinction of the old stirrings. We are reminded of the proverb “a young whore makes an old nun,” except that in this case, youth has lasted all too short a time. The fact that perversion can be replaced by neurosis in the life of the same person, like the fact which we have previously mentioned, that perversion and neurosis can be distributed among different members of the same family, tallies with the view that neurosis is the negative of perversion.

Sublimation

The third outcome of an abnormal constitutional disposition is made possible by the process of *sublimation*. This opens an outlet for

excessively strong excitations arising from particular sources of sexuality, and a possibility for their use in other fields, resulting in a not inconsiderable increase in psychical efficiency arising from a disposition in itself perilous. Here we have one of the sources of artistic creativity; depending on whether the process of sublimation is complete or incomplete, a characterological analysis of a highly gifted individual, and in particular, of one with an artistic disposition, may reveal a mixture, in various proportions, of efficiency, perversion, and neurosis. Suppression by *reaction formation* is presumably a sub-species of sublimation; as we have seen, it begins during a child's latency period and continues, in the most favorable of cases, throughout the whole of life. What we describe as a person's "character" is built up, for the most part, from the material of sexual excitations and is composed of drives fixed since childhood, of constructions obtained by means of sublimation, and of other constructions employed for effectively holding in check perverse stirrings that have proved unusable. The generally perverse sexual disposition of childhood can thus be regarded as the source of a number of our virtues to the extent that, through reaction formation, it initiates their development.*

Accidental experiences

Compared to the releases of sexuality, waves of repression, and sublimation—the last two being processes whose inner conditions are quite unknown to us—all other influences pale in significance. Anyone who counts repressions and sublimations as part of the constitutional disposition, as part of its manifestations in life, would be justified in asserting that the final shape taken by sexual life is principally the outcome of the innate constitution. However, no one with any insight will dispute that an interplay of factors such as this also leaves room for the modifying influences of accidental events experienced in childhood and later on.

Let us now resume our task of enumerating the factors that we have found to exercise an important influence on sexual development, whether they are themselves operative forces or merely manifestations of such forces.

Precocity

One such factor is spontaneous sexual *precocity*, whose presence can be demonstrated with certainty at least in the etiology of the neuroses, though, just like other factors, it cannot be considered a sufficient cause in itself. It manifests itself in the interruption, abbreviation, or ending of the infantile period of latency, and it becomes a cause of disturbances by occasioning sexual manifestations which, owing on the one hand to the incomplete state of the sexual inhibitions, and on the other hand to the undeveloped state of the genital system, are bound to take on the character of perversions. These tendencies to perversion may thereafter either persist as such or, after repressions have set in, become the driving forces of neurotic symptoms. In any case, sexual precocity impedes the control of the sexual drive by the higher psychic agencies, which is so desirable at a later stage, and it exacerbates the compulsive quality that, quite apart from this, characterizes the psychical representations of the drive. Sexual precocity often runs parallel to premature intellectual development; as such it is to be found in the childhood history of persons of the greatest eminence and capacity, in which case it does not seem to be as pathogenic as when it appears in isolation.

Pertinacity of early impressions

The importance of all early sexual manifestations is heightened by a psychical factor of unknown origin, which at this stage can admittedly only be posited as a provisional psychological concept. I have in mind the fact that, in order to account for the situation, one has to assume that these early impressions of sexual life are characterized by an increased *pertinacity* or *susceptibility to fixation* in persons who are later to become neurotics, as well as perverts; for the same premature sexual manifestations occurring in other persons fail to make so deep an impression that they compulsively urge repetition, and fail to prescribe the paths to be taken by the sexual drive for a whole lifetime. Part of the explanation of this pertinacity of early impressions may perhaps lie in another psychical factor that we cannot fail to notice in the causation of the neuroses, namely the preponderance given in psychic life to memory traces in comparison with recent impressions. This factor is clearly dependent on intellectual education and grows in proportion to the level of enculturation. Primitive man, in contrast, has been described as “the hapless child of nature.”* Because of the inverse relation holding between

culture and the free development of sexuality, the consequences of which can be traced far into the structure of our existences, the course taken by the sexual life of a child is just as unimportant for later life where the cultural or social level is relatively low as it is important where that level is relatively high.

Fixation

The positive influence of the psychical factors just mentioned affords a favorable basis for accidentally experienced stimulations of infantile sexuality. These stimulations (first and foremost, seduction by other children or by adults) provide the material that, with the help of the psychical factors, can become fixated as a permanent disturbance. A good part of the deviations from normal sexual life which are later observed in both neurotics and perverts have thus been established from the very first by the impressions received in childhood—a period which is regarded as being devoid of sexuality. The causation is shared between a compliant constitution, precocity, the quality of the increased pertinacity of early impressions, and the chance stimulation of the sexual drive by extraneous influences.

The unsatisfactory conclusion, however, that emerges from these investigations of the disturbances of sexual life is that we know far too little of the biological processes constituting the essence of sexuality to be able to construct from our scattered insights a theory adequate to understanding the normal as well as the pathological.

Notes

Foreword: The Missing Object

1 For a list of these omissions, see the translator's note.
2 There is one reference in a footnote to the "Oedipus fable" (p. 67), but one can hardly consider this an acknowledgment of a psychological Oedipus complex. This problem is further discussed in this translation's introductory essay, "Hysteria, Sexuality, and the Deconstruction of Normativity—Rereading Freud's 1905 Edition of *Three Essays on the Theory of Sexuality*."

Introduction: Hysteria, Sexuality, and the Deconstruction of Normativity —Rereading Freud's 1905 edition of Three Essays on the Theory of Sexuality

1 "Readers of my *Three Essays on the Theory of Sexuality* will be aware that I have never undertaken any thorough remodelling of that work in its later editions, but have retained the original arrangement and have kept abreast of the advances made in our knowledge by means of interpolations and alterations in the text. In doing this, it may often have happened that what was old and what was more recent did not admit of being merged into an entirely uncontradictory whole" (Freud 1923e: 141).
2 Freud 1905: 1–2. In the references to the 1905 *Three Essays*, the page numbers refer to the original German edition of 1905.
3 With regard to sexuality, Freud uses both the term *Geschlechtstrieb* and *Sexualtrieb*. We have translated *Geschlechtstrieb* as genital drive, because it refers to the genitally organized sexual attraction between two individuals. *Sexualtrieb*, on the contrary, refers to Freud's new concept of sexuality that is no longer defined in terms of an intrinsic natural genital object. For further information, see our discussion below and the translator's note.
4 Krafft-Ebing uses genital drive (*Geschlechtstrieb*), sexual drive (*Sexualtrieb*), and reproduction drive (*Fortpflanzungstrieb*) as equivalents; Freud does not. Cf. note 3.
5 Krafft-Ebing 1965 [1886]: 1. On Krafft-Ebing and his influence on Freud, see Sulloway (1979), Oosterhuis (2000), Davidson (2001), and Oosterhuis (2012).
6 Krafft-Ebing 1965 [1886]: 32. Arnold Davidson has correctly argued that the distinction between normal (natural) and perverse (unnatural) sexuality was not a post-Darwinian invention of psychiatry and sexology. The distinction has much older roots in a long Western Christian tradition of a hermeneutics of sexual life continued into modern times.

The shift that takes place in the nineteenth century consists of the reassignment of the study and regulation of the perversions from (a religiously motivated) morality and law toward medicine—a shift that also includes a continuation of a strong moral evaluation of the perversions. It is only now that the perversions can be defined in terms of distinct pathologies and subjective identities (Davidson 2001: 23–24). On the same topic, see also Mazaleigue (2014).

7 Krafft-Ebing 1965 [1886]: 52–3.

8 Moll 1898: 241ff.

9 This impulse mainly described what Freud calls "tender feelings" (*Zärtlichkeit*) and what we would nowadays refer to as "attachment" (see below). On the works of Moll, see Sauerteig (2012) and Sigusch (2012).

10 Westerink 2009: 58ff.

11 Krafft-Ebing 1965 [1886]: 1–17.

12 See for example, Fuchs 1902.

13 Freud 1908d.

14 Krafft-Ebing 1965 [1886]: 56.

15 Idem: 188.

16 Krafft-Ebing 1901: 8. See also Oosterhuis 2012. In his 1901 article, Krafft-Ebing further argues that in acquired homosexuality—the common form of homosexuality—seduction plays a decisive role. It is for this reason that suggestion can be a therapeutic tool in the cure of homosexuality. Given Freud's views on seduction (see below) and the well-known response of Krafft-Ebing to Freud's lecture on the seduction theory in 1896—Krafft-Ebing calling this theory a scientific fairy tale—this reference to seduction is remarkable. However, we should also note that the German psychologist and sexologist Albert von Schrenck-Notzing had claimed that cultural factors such as education were decisive in the etiology of perversions, and that suggestion and hypnosis could be successfully employed in therapy (Oosterhuis 2000: 61).

17 Hirschfeld 1899.

18 Bloch 1902: 6–7; Davidson 2001: 80–2.

19 Freud 1905: 1.

20 Idem: 3–7.

21 We should note here that Freud mainly deals with homosexuality as a "perversion," and in doing so shows the fundamental shortcomings of the theoretical models of his predecessors. That does not mean that Freud's view of homosexuality as such is clear and consistent. In the 1905 edition, the paradigmatic form of homosexuality is the adult man's love of boys and of young adolescents in ancient Greece. Some years later, in the Schreber case, Freud will argue that Schreber's transsexual wish to become a woman can in fact be called a homosexual wish. But the identification of Greek pederasty or Schreber's transsexuality as homosexuality is far from self-evident (Freud 1905: 9; Freud 1911c).

22 Freud 1905: 10.

23 The implication is what Arnold Davidson has rightfully described as "a conceptually devastating blow to the entire structure of nineteenth-century theories of sexual psychopathology" (Davidson 2001: 79).

24 Spielrein 1912: 98ff; Nunberg and Federn 1962: 335.

25 Jung 1912a: 138; 1912b: 127–8, 148–54.

26 Vandermeersch 1991.

27 Freud 1905: 12.

28 Idem: 13.

29 Freud 1906a: 278.

30 Freud 1905: 34–5.

31 Freud 1985: 163.
32 Freud 1985: 280. Freud tries to explain this development by drawing upon evolutionary developments: in starting to walk upright, man is estranged from the smells of the earth and former visual experiences. Shame and disgust are the first results of this evolutionary process, and as such they mark the first difference between man and animal. On organic repression, see Van Haute & Geyskens (2004: 44–5).
33 Freud 1905: 14.
34 Idem: 19–21.
35 Idem: 21.
36 We are far removed here from metapsychological theories on perversion that were developed after Freud and *in the name of* Freud. The reader may think here of the classical book by Stoller (1975) and of the work of Lacan. In both cases, "perversion" is thematized as a distinctive "identity"—calling it a structure (Lacan) does not change much in this context—that can be clearly distinguished from other identities ("structures"). In this respect, Freud is more on the side of recent queer theory than on the side of traditional psychoanalysis (Dean 2008; Van Haute 2016).
37 Freud 1905: 18.
38 De Vleminck 2013.
39 It seems that Freud calls pain a reaction formation because he is looking for an explanation of sadomasochism that is formally analogous to his explanation of the other perversions. Just as shame is a limit that is overcome in voyeurism/exhibitionism, so pain is considered the limit that is overcome or put into question in sadomasochism. But what forbidden pleasure could pain possibly hide? Freud's basic model of perversion is hard to universalize, and it cannot make the different perversions intelligible in the same way.
40 Freud 1905: 46.
41 Idem: 45.
42 In his writings on hysteria, Freud occasionally thematizes a form of aggression that has no inherent object, namely rage or anger. It is telling that in his studies of obsessional neurosis, Freud will highlight hatred (and the ambivalence of feelings) as being of fundamental importance for understanding all object-related forms of aggression, including sadism (Westerink 2015).
43 Freud 1905: 23.
44 Freud would later recall that Charcot commented, with reference to the origin of hysteria: "C'est toujours la chose génitale, toujours … toujours … toujours" (Westerink 2009: 8).
45 Freud 1906a: 275–6.
46 Freud 1905: 29.
47 In the *Three Essays*, this development in Freud's thought is most clearly expressed in endnote 7: "In the understanding of inversion, pathological approaches have been replaced by anthropological ones" (Freud 1905: 80).
48 Rank and Sachs argued in their programmatic opening article of the first issue of *Imago* (1912) that because of Freud's view of the psychopathologies as magnifications and exaggerations of general human psychic dynamics, the findings derived from the study of psychopathologies, they could not be limited to the field of pathology alone. Freud could therefore make the step toward the study of normal everyday phenomena (dreams, jokes, slips of the tongue, and the like) and cultural phenomena such as art, myth and religion. The latter phenomena were of particular interest in the field of applied psychoanalysis, since, according to Rank and Sachs, these cultural phenomena could be regarded as theater staging those repressed drives that were apparently unusable (not functional) for practical cultural life. Hence psychoanalysis was particularly interested in those cultural phenomena that did not contribute to the preservation of the individual and the group through procreation and

labor (communal life, family life). Two remarks should be made about this. Firstly, this view on applied psychoanalysis as the study of "theatrical stages" is still closely associated with the model of hysteria and Freud's critique of the functional interpretation of the sexual drives. Secondly, the anthropological approach in *Three Essays* indeed enables this text to be situated in a series of attempts (starting with *Interpretation of Dreams*) to analyze general human aspects of everyday life (Rank & Sachs 1912).

49 Freud 1905: 29.

50 Van Haute 2005; 2013.

51 Freud 1905: 24.

52 In this context Freud also remarks that "among the unconscious trains of thought found in neuroses there is nothing corresponding to a tendency to fetishism." This shows us that the relation between the neuroses and the perversions is more complex than the formula "neurosis is the negative of perversion" at first sight seems to suggest (Freud 1905: 25–6).

53 Van Haute and Geyskens 2012.

54 Freud 1905: 25, 62.

55 Freud 1985: 364.

56 Idem: 448.

57 Freud 1905: 25.

58 This seems to parallel the kind of ambiguity and "need of variation" one also finds in bisexuality.

59 Idem: 25, 38.

60 Idem: 14.

61 Freud 1905e: 31. Freud adds in a footnote: "It is scarcely possible to exaggerate the pathogenic significance of the comprehensive tie uniting the sexual and the excremental, a tie which is at the basis of a very large number of hysterical phobias" (Freud 1905e: 32).

62 Freud 1905: 26.

63 Freud 1905d: 67–8; 1915c: 124–6.

64 Freud 1905: 26. Freud places "drive" in quotation marks and with good reasons: in 1905 he had not yet formulated a drive theory. To support an interpretation of the drive as (the/a?) motor impulse, one might refer to *Project of a Scientific Psychology* (1895), where Freud had developed a neurobiological theory of stimuli (*Reize*) and pressure (*Drang*) in terms of the quantities and discharge of neurons. However, the *Project* was never published during Freud's lifetime, and we find no references to this theory in the *Three Essays*.

65 Why did Freud delete this passage in 1915? An important reason can be found in Jung's exposition of his genetic theory of the libido (1912), which offers yet another peculiar reading of the passage. Jung argues that Freud suggests a single primordial drive splitting up in various directions and causing certain bodily functions, zones, and objects to be cathected with sexuality. In this way, zones (for example, the lips) that were initially without sexual function could receive such a function (kissing) in the context of a natural process of efficient differentiation and growth. In this reading, the drive does not become sexual through the link with bodily zones, but, on the contrary, certain bodily zones receive a sexual function when the primordial libido differentiates into various domains and specialized functions. It is against Jung's genetic theory of the drives that Freud will then stress the existence of two primal drives, of which one is sexual by nature and aimed at preservation of the species. To prevent any misunderstanding and future heresies, he deletes the passage. See Jung (1912a: 133–9) and Vandermeersch (1991: 231ff).

66 Because of his critique of the functional approach in contemporary Darwinian thought, Freud basically dismisses all arguments for the Darwinian drive dichotomy. Interestingly, Freud does not provide any new arguments for the idea that psychic life is characterized by two fundamental tendencies or drives.

67 Freud 1905: 36; Geyskens 2005: 21–8.
68 There could be another argument that Freud does not develop himself in the text we are commenting on: the infantile pleasures are clearly sexual when they are integrated in adult sexuality (e.g., kissing). Since they are "sexual" at the end of the development, they must already have been sexual from the beginning.
69 This probably also explains why Freud, in discussing the "sources of infantile sexuality" at the end of the second part of his text, identifies without much ado the pleasurable experiences caused by "mechanical shocks" (one could think here of sitting in a train) as sexual in nature. Along the same lines, Freud writes that intellectual activities can go along with "a concomitant sexual excitation," which "is no doubt the only justifiable basis for what is in other respects a highly questionable derivation of nervous disturbances from intellectual 'overwork'" (Freud 1905: 50).
70 Ellis 1918 [1900]: 161ff.
71 We do not agree with Jonathan Lear's reading of Freud's theory on infantile sexuality (Lear 2005: 70–82). Lear argues that in Freud's view, human sexuality is essentially imaginative and that sensual sucking is a pleasurable imaginative activity. We find a similar idea in the work of Jean Laplanche (1987: 71). According to Laplanche, the infantile autoerotic activity is essentially fantasmatic. According to Freud, however, neither imagination nor fantasy is among pleasurable infantile activities.
72 Ulrike May has shown that it is only in the 1915 edition of *Three Essays* that Freud will first associate sensual sucking with the aim of "incorporation of the object" (cannibalistic tendencies, introjection, identification). Hence, it is in 1915 that Freud reinterprets sensual sucking in object-relational terms (2015: 134–42).
73 Freud 1905: 37.
74 Idem: 38.
75 Idem: 63–4.
76 "In childhood, therefore, the sexual drive is without an object, that is, *autoerotic*" (Freud 1905: 72, emphasis original).
77 Only from puberty onward is pleasure sought in relation to the object that can provide it.
78 One could think here for instance of Lacan's famous dictum that "desire is lack of being" (Lacan 1966: 793–827).
79 Freud 1905e: 29.
80 Idem: 30.
81 Freud 1905: 39.
82 Freud 1905e: 47.
83 Idem: 48.
84 "A young man who was a great admirer of feminine beauty was talking once—so the story went—of the good-looking wet-nurse who had suckled him when he was a baby: 'I'm sorry,' he remarked, 'that I didn't make a better use of my opportunity.' I was in the habit of quoting this anecdote to explain the factor of deferred action in the mechanism of the psychoneurosis" (Freud 1900a: 204–5).
85 Freud 1895: 354–6.
86 Freud 1905e: 24.
87 Freud: 1985: 264.
88 One can think here for instance of Ernst Kris, who writes the following: "In his letters [to Wilhelm Fliess], we learn that Freud's insight into the structure of the Oedipus complex, that is, the core problem of psychoanalysis, was made possible by his self-analysis, which he began in the summer of 1897 during his stay in Aussee" (1986: 545, our translation).
89 Freud 1905: 44.

90 We have to read this statement together with another one from “My Views” that seems to contradict it: “At that time my material was still scanty, and it happened by chance to include a disproportionately large number of cases in which sexual seduction by an adult or by older children played the chief part in the history of the patient’s childhood. I thus over-estimated the frequency of such events (though in other respects they were not open to doubt)” (Freud 1906a: 152). The contradiction is only apparent. What Freud says is that he did not overestimate the importance of seduction in the 18 cases he reported in “The Aetiology of Hysteria.” But since he did not realize at that time that sexual constitution can also arouse a child’s sex life, he overestimated its importance in general. For this interpretation and for a more detailed reading of these passages, see Davidson (1984).

91 Freud 1905: 23.

92 Freud 1905e: 31.

93 The few references to this complex were introduced in later editions, and more particularly in the footnotes to the edition of 1920.

94 It is only in the edition of 1915 that Freud describes infantile sexuality as objectal in itself. From that time forward, he speaks of a “diphasic object-choice.” The first phase would take place in the period between two and five years old. The object-choices of that period would appear “unutilizable” because of repression, and then be inhibited until their return at the beginning of puberty (Freud 1905d: 200).

95 Freud 1905: 67.

96 It seems clear from the context that the “interests” that we need to build a community are, according to Freud, of a libidinal nature, but he does not explain—or is not yet capable of explaining—in the first edition of *Three Essays* how the transformation of the libidinal investment of the parental figures gives rise to social feelings. The establishment of social bonds is not thematized in this text. It is not until *Totem and Taboo* (1913) that Freud will provide a full account of this thematic.

97 Freud 1900a: 257ff; 1905e: 56.

98 Blass 1992; Van Haute and Geyskens 2012: 54–6.

99 Roudinesco 2014. “His fate moves us only because it might have been our own, because the oracle laid upon us before our birth the very curse which rested upon him” (Freud 1900a, 246–7).

100 Freud 1908c.

101 Freud 1909b.

102 Freud further systematized the insights that he gained from these studies in some new paragraphs on “the sexual researches of children” that he will add to the 1915 edition of his text. He concludes from the case of Little Hans that the process of the choice of object is “diphasic” and “occurs in two waves,” the first taking part in the period between two and five years, the second setting in with puberty (1905d: 200). Pubertal and adult sexuality can only now be considered as the “persistence” and “revival” of the infantile object-choices. The 1915 paragraph on the diphasic objects-choice thus marks a fundamental shift in Freud’s thinking on sexuality. No longer does he defend a strict dichotomy between an auto-erotic infantile period and object-related adult sexuality (Freud 1905d: 194–200).

103 The idea that the Oedipus complex contains the key to *all* psychopathology, meaning that all psychopathological syndromes are to be considered as vicissitudes of the (psychosexual) relations between the child and its parents, and that it is the obligatory road for entry into the world of culture, is first formulated in the fourth essay of *Totem and Taboo* (Freud 1912–13: 160–61). The Oedipus complex gets its canonical formulation in *The Ego and the Id* of 1923, where Freud calls it the shibboleth of psychoanalysis (Freud 1923b: 13).

104 Freud 1905: 64.

105 Idem: 66.

106 Bowlby 1969.
107 Bowlby 1969: 210–34.
108 Freud 1905: 66.
109 “We can anticipate that these characteristics will be found to apply to most of the other activities of the infantile sexual drive” (Freud 1905: 38).
110 This explains why, in the beginning of the third part, Freud qualifies infantile sexuality as “*predominantly* autoerotic” (idem: 53).
111 Idem: 45.
112 Idem: 46.
113 A reason for this imbalance could be the fact that Freud, in *Three Essays*, takes hysteria as the model for the study of sexuality. In earlier writings, he had associated cruelty almost exclusively with the obsessional neurotic’s aggressive urge for sexual pleasure. Another reason lies in the fact that Freud clearly wants to relate his text to Krafft-Ebing’s catalog of the various sexual perversions.
114 Laplanche 1992: 57.
115 Freud 1905: 64.
116 Idem: 65. In this quotation Freud seems to identify “love” and “sexual need” (*Sexualbedürfnis*), an identification which is far from self-evident. But the status of “love” is difficult to thematize within the exclusive distinction between sexuality and self-preservation.
117 Laplanche 1987; Van Haute and Geyskens 2004: 103–44.
118 Freud 1905: 53.
119 Idem: 56.
120 “The normality of sex life is warranted solely by an exact convergence of the two currents directed toward the sexual object and the sexual aim … The sexual drive now puts itself at the service of the reproductive function” (Freud 1905: 53).
121 In the summary of the text, Freud writes that puberty brings about the primacy of the genital zone and the finding of the object. The latter is immediately identified with a heterosexual object (Freud 1905: 73). Interestingly enough, Freud adds that the object-choice is prepared in the infantile period by the “sexual inclination” of children toward their parents and caregivers, which is refreshed at the beginning of puberty, and by the introduction of the incest barriers that turn children away from these objects. Does this not also undermine the general line of Freud’s argumentation by introducing a more “functional approach” to sexuality? And does this not, if only in an extremely sketchy way, anticipate later developments such as the Oedipus complex?
122 Idem: 56.
123 Freud conceives of sexuality in this first edition to a large extent without any reference to sexual difference. The problematic of sexual difference only comes to the fore at the beginning of puberty, when sexuality finds its object. The introduction of this difference is, moreover, immediately linked to the different role the sexes play in reproduction: “Since the new sexual aim assigns very different functions to the two sexes, their sexual development now diverges widely” (Freud 1905: 53). Clearly Freud here surrenders to the paradigm of classical sexology.
124 Idem: 75.
125 Davidson 2001: 89.
126 “I have recently been able to throw light upon another example, from a vastly different area of psychical dynamics, in which similarly, a greater effect of pleasure is being afforded by means of a less intense sensation of pleasure acting, as it were, as an incentive bonus. This also provided an opportunity to take a closer look at the nature of pleasure” (Freud 1905: 57).

127 “That being so, it cannot be disputed that we supplement our pleasure by attaining the laughter that is impossible for us by the roundabout path of the impression we have of the person who has been made to laugh. As Dugas has put it, we laugh as it were ‘par ricochet’ … When I make the other person laugh by telling him my joke, I am actually making use of him to arouse my own laughter” (Freud 1905c: 155–6).

128 For an extensive and brilliant interpretation of the passages we are commenting on here, see Moyaert (2012).

129 At this point, our reading of the 1905 *Three Essays* as a text in which Freud identifies two regimes of sexuality—infantile autoerotic sexuality and pubertal/adult genital object-related sexuality—comes close to Laplanche’s reading of the *Three Essays* (Laplanche 2007: 25). We would like to note, however, that although Laplanche establishes the connection between the two regimes of sexuality and the question of the translation of *Sexualtrieb* (sexual drive) and *Geschlechtstrieb* (genital drive), he neglects the fact that according to Freud infantile sexuality is without object. On this issue, see also the translator’s note.

130 Freud 1908e: 421–2.

131 This reference to the theater and hence culture inevitably introduces the psychoanalytic problem of sublimation that Freud also mentions in his text without paying much attention to it. In our text, Freud considers sublimation within the context of, or even as a subcategory of, reaction formation (Freud 1905: 33–4).

132 “But the limits of such disgust are purely conventional; a man who passionately kisses the lips of a pretty girl may be disgusted at the idea of using her toothbrush, even though there are no grounds for supposing that his own oral cavity, for which he feels no disgust, is any cleaner than that of the girl” (Freud 1905: 13).

133 In Freud’s view, culture cannot but take nature into account and respect its fundamental tendencies: “Education will remain perfectly within its mandated domain if it limits itself to following the lines which have already been laid down organically, and to imprinting them somewhat more clearly and deeply” (Freud 1905: 34).

134 Davidson 2001: 91.

135 Jung 1907; Vandermeersch 1991.

136 Freud 1911c.

137 Micale 1993; 1995.

138 It is quite telling in this context that Jung’s book on psychosis contains a chapter entitled “Hysteria und Dementia praecox,” in which he shows, among other things, the marked similarities between these two pathologies (Jung 1907: 81–116).

139 Freud 1914c.

140 Freud 1911c: 60–1.

141 Freud 1913i.

142 Freud 1905d: 197–200.

143 Freud 1923e: 142.

144 Bisexuality does not completely disappear from Freud’s text. Freud refers to it, for example, in his study on the young homosexual, and it remains present in the theory of the Oedipus complex under the heading of a “positive” and “negative” Oedipus complex (Freud 1920a).

145 Van Haute 2002.

146 Hacking 1995.

147 De Vleminck 2013; Westerink 2014.

Translating the First Edition of Freud’s Drei Abhandlungen zur Sexualtheorie

1 The authors and the translator would like to thank Desmond Painter and the Verso editors for reading the final draft of the translation, coordinating an ear for idiomatic English with the reading eye. For further on translation, see the essay alluded to Benjamin (1923) 1999.

2 Freud 1896 in Bonaparte, Freud, Kris 1954: 175. "A *fuero* was an ancient Spanish law holding good in some particular city or province and guaranteeing that region's immemorial privileges" (idem: n.2).

3 The neologism *Überlebsel* first appeared in the 1873 German translation of Edward Burnett Tylor's *Primitive Culture* (1871) by J.W. Spengel and F. Poske (1873: 16), and was subsequently taken up variously by Friedrich Nietzsche—see for instance Fragment no. 5 [155] of Spring–Summer 1875 (1980: 83).

4 See Abensour, in Cassin, Apter, Lezra and Wood 2014.

5 "… as if it were an instinctive flight …" (Freud 1905: 23) is the phrase in which the adjective is embedded.

6 The need for a new translation based on this consideration is also strongly emphasized by Mark Solms (see Solms 2013: 206), editor of the new *Revised Standard Edition of the Complete Psychological Works of Sigmund Freud* that is presently in preparation. The retranslation of the 1924 version of *Three Essays* by Shaun Whiteside has also opted for the translation of *Trieb* as "drive" (see Whiteside 2006: xxix).

7 See Laplanche and Pontalis 1967; see also Lacan 1966: 851.

8 See Laplanche 2007.

9 Laplanche and Pontalis 1973 [1967]: 216.

10 There is no term in English that corresponds in all respects and possibilities to the wide semantic range of the German term *Geschlecht*. However, the distinction in English between "genital" and "sexual" captures one aspect of Freud's delineation of different semantic contexts pivoting on the terms *Geschlechts* and *Sexual*/*sexuell*—a distinction that forms a cornerstone of the theoretical revolution of *Drei Abhandlungen*.

11 Freud 1905: 1.

12 At the beginning of the first essay, "The Sexual Aberrations," as Freud outlines the "popular opinion" that becomes the subject of critique, he speaks of *Geschlechtstrieb*. Thus, on the first ten pages, *Geschlechtstrieb* occurs twelve times, while *Sexualtrieb* appears only twice. In the remaining part of this first essay, however, *Geschlechtstrieb* is hardly mentioned. In the part of the first essay in which Freud discusses the deviations with regard to the aim of sexuality, i.e., those perversions in which the genital zone does not play a crucial role, *Sexualtrieb* occurs fifteen times, and *Geschlechtstrieb* only once. In the second essay, "Infantile Sexuality," *Geschlechtstrieb* occurs only four times, and *Sexualtrieb* ten times. With regard to the *Sexualtrieb* in infantile sexuality, there are clearly many instances in which speaking of a *Geschlechtstrieb* would not have made much sense.

13 See, e.g., Freud 1905: 7–8.

14 This is in contrast to Strachey's translation, which only distinguished "thumbsucking (or sensual sucking)" from "sucking," suggesting a heightened intensity, rather than a change of register, between the nonfunctional infantile sexual drives and the functional drive for food intake. See Freud 1905d *SE* 7: 180–184.

15 On neurosis, see, e.g., Freud 1905: 22–24; on perversion, see, e.g., idem: 17, 20.

16 Strachey 1966: xix.

17 See Bettelheim 1984: 90.

18 Freud 1905: 17.

19 Freud 1905: 22, 23.

20 See Schröter 2015: 559–60.

21 Strachey adds "morality" here without acknowledging the addition. Freud 1905d *SE* 7: 164.

22 The fourth edition of 1920 contains this clause, which Strachey does not mention as an addition. Freud *SE7* 1905d: 186–7.
23 Strachey does not note his addition of “instinctual” here. Freud *SE* 7 1905d: 232.
24 Typographical errors in the German text of the first edition of *Drei Abhandlungen* are listed in the reprinted version of that text, edited by Philippe van Haute, Christian Huber and Herman Westerink (2015: 57–58).
25 Freud 1905: 6.
26 Freud 1905: 80 n.1; also n.7; 81 n.12.
27 Freud 1905: 80 n.1.

Notes to the Three Essays

1. The information contained in this first essay is derived from the well-known publications of Krafft-Ebing, Moll, Moebius, Havelock Ellis, Schrenk-Notzing [*sic*], Löwenfeld, Eulenburg, J. [*sic*] Bloch, and from the works in the *Jahrbuch für sexuelle Zwischenstufen*, edited by M. Hirschfeld. Since the remaining literature on the subject is comprehensively provided here, I have been able to spare myself the necessity of giving detailed references.
2. On these difficulties, and on the attempts to find out the proportional number of inverts, see the article by M. Hirschfeld in *Jahrbuch für sexuelle Zwischenstufen*, 1904.
3. The attempt of countering the compulsion to inversion could possibly constitute a condition for the possibility of its cure through treatment involving suggestion.
4. Several writers have justifiably stressed that the autobiographical information supplied by inverts themselves on the time at which the tendency to inversion occurred are unreliable, as they may have repressed the evidence of their heterosexual feelings from their memory. This point could be determined only through psychoanalytic investigation of inverted persons.
5. What reservations should be heeded in the diagnosis of degeneracy, and of what minor practical importance it is, can be gleaned from Moebius’s statements (Über Entartung, *Grenzfragen des Nervenund Seelenlebens*, Nr. III, 1900): “If we survey the wide field of degeneracy upon which some glimpses of revealing light have been thrown in these pages, it will at once be clear that there is very little value in ever making a diagnosis of degeneracy.”
6. It must be conceded to the spokespersons of “uranism” that some of the most prominent men in all recorded history were inverts, and perhaps even absolute inverts.
7. In the understanding of inversion, pathological approaches have been replaced by anthropological ones. The merit for bringing about this change is due to J. [*sic*] Bloch (*Beiträge zur Ätiologie der Psychopathia sexualis*, 2 Teile, 1902–1903), who also explicitly made the case for the occurrence of inversion among the civilizations of antiquity.
8. For the most recent detailed descriptions of somatic hermaphroditism, see Taruffi, *Hermaphroditismus und Zeugungsunfähigkeit*, German edition by R. Teuscher, 1903, and the papers by Neugebauer in several volumes of the *Jahrbuch für sexuelle Zwischenstufen*.
9. J. Halban, “Die Entstehung der Geschlechtscharaktere. Archiv für Gynäkologie,” Bd. 70, 1903. This paper includes a bibliography on the subject.
10. It appears (from a bibliography given in the sixth volume of the *Jahrbuch für sexuelle Zwischenstufen*) that E. Gley was the first writer to have explained inversion by reference to bisexuality. As early as January 1884, he published an article (Les aberrations de l’instinct sexuel) in the *Revue philosophique*. It is moreover noteworthy that the majority of the authors who derive inversion from bisexuality make that factor pertain not only to inverts, but also to all those who have grown up to be normal, and that, as logical consequence, they regard inversion as the result of a disturbance in development. Chevalier already makes this point (*Inversion sexuelle*, 1893). Krafft-Ebing (Zur Erklärung der konträren

Sexualempfindung, *Jahrbücher für Psychiatrie und Nervenheilkunde*, XIII) remarks that there are a great number of observations "which prove at least the virtual persistence of this second center (that of the subordinated sex)." In the second volume of the *Jahrbuch für sexuelle Zwischenstufen* (1900), a certain Dr. Arduin (Die Frauenfrage und die sexuellen Zwischenstufen) asserts that "there are masculine and feminine elements in every human being" (cf. Jahrbuch, Bd. I, 1899). "The objective diagnosis of homosexuality" by Dr. M. Hirschfeld (pp. 8–10) contends that but one set of these—depending on the sex of the person in question—is incomparably more strongly developed than the other, so far as heterosexual individuals are concerned." G. Herman (*Genesis: Das Gesetz der Zeugung*, 9 Bd., 1903) is convinced that "masculine elements and characteristics are present in every woman, and feminine ones in every man," etc.

11. In this connection, I cannot help recalling the credulous submissiveness shown by hypnotized subjects toward their hypnotist. This leads me to suspect that the essence of hypnosis is to be sought in an unconscious fixation of the subject's libido to the figure of the hypnotist, through the medium of the masochistic components of the sexual drive.
12. Further considerations amount to the conclusion that J. [*sic*] Bloch has overestimated the theoretical significance of the craving for stimulation. The various paths along which the libido passes relate to each other from the start like communicating tubes, and one has to take the phenomenon of collateral flow into account.
13. Instead of adducing numerous cases in evidence of this contention, I will quote only one passage from Havelock Ellis (*Das Geschlechtsgefühl*, 1930): "All known cases of sadism and masochism, even those cited by Krafft-Ebing (as Colin, Scott, and Féré have already demonstrated), constantly reveal traces of both groups of phenomena in the same individual."
14. The assertion made in the text has, even in retrospect, struck me as being so bold that I have undertaken the task of testing its validity by looking through the literature once more. The outcome of this is that I have allowed my statement to stand unaltered. The scientific examination of both the somatic and psychical phenomena of sexuality in childhood is still in its earliest beginnings. One writer, S. Bell ("A Preliminary Study of the Emotion of Love Between the Sexes," *American Journal of Psychology*, XIII, 1902), remarks: "I know of no scientist who has given a careful analysis of the emotion as il it [*sic*] seen in the adolescent." Somatic sexual manifestations from the period before puberty have only attracted attention in connection with phenomena of degeneracy and as signs of degeneracy. In none of the accounts which I have read of the psychology of this period of life is a chapter to be found on the erotic life of children, and this applies to the well-known works of Preyer, Baldwin (*Die Entwicklung des Geistes beim Kinde und bei der Rasse*, 1898), Pérez (*L'enfant de 3–7 ans*, 1894), Strümpell (*Die pädagogische Pathologie*, 1899), Karl Groos (*Das Seelenleben des Kindes*, 1904), T. Heller (*Grundriss der Heilpädagogik*, 1904), Sully (*Untersuchungen über die Kindheit*, 1897), and others. We can obtain the clearest impression of the current state of things in this field from the periodical *Die Kinderfehler* (from 1896 onward). Nevertheless, one gets the idea that the existence of love in childhood is no longer in need of discovery. Pérez argues in favor of its existence. K. Groos (*Spiele des Menschen*, 1899) mentions as a generally recognized fact that "some children are receptive to sexual impulses at a very early age and feel an urge to have contact with the opposite sex" (p. 326). The earliest instance of the appearance of the genital stirrings of love ("sex-love") recorded by S. Bell concerns a child in the middle of his third year. On this point, compare further Havelock Ellis, *Das Geschlechtsgefühl* (translated by Kurella), 1903, Appendix II.
15. I have attempted to solve one of the problems connected with the earliest memories of childhood in a paper entitled Screen Memories (*Monatsschrift für Psychiatrie und Neurologie*, VI, 1899).

16. There is a possible anatomical analogy to what I have upheld as the course of development of the infantile sexual function in Bayer's discovery (*Deutsches Archiv für klinische Medizin*, Bd. 73) that the internal genitals (uterus) are as a rule larger in newborn children than in older ones. It is not certain, however, what view we should take of this involution that occurs after birth (which has been shown by Halban to apply also to other parts of the genital apparatus). According to Halban (*Zeitschrift für Geburtshilfe und Gynäkologie*, LIII, 1904), the process of involution comes to an end after a few weeks of extra-uterine life.
17. In *Jahrbuch für Kinderheilkunde*, N.F., XIV, 1879.
18. Cf. the very rich, but in most aspects unfocused, literature on masturbation, e.g., Rohleder, *Die Masturbation*, 1899.
19. In an appendix to his study on Geschlechtsgefühl (1903), Havelock Ellis published a number of autobiographical accounts, given by persons who remained predominantly normal in later life, of their first sexual impulses in childhood and the occasions that gave rise to them. These reports naturally suffer from the fact that they omit the prehistoric period of the writers' sex lives, which is covered over by infantile amnesia and which can only be more fully investigated through psychoanalysis in the case of an individual who has become neurotic. Nevertheless, the statements are valuable in more than one respect; and similar investigations were what led me to make the modification to my etiological hypotheses mentioned in the text.
20. See my study *Jokes and Their Relation to the Unconscious*, published in 1905. The "fore-pleasure" attained by the technique of joking is used to liberate a greater pleasure through the removal of inner inhibitions.
21. It is highly instructive that the German language in its use of the word *Lust* takes into account the part played by the preparatory sexual excitations that simultaneously produce an element of satisfaction and a contribution to sexual tension. *Lust* has two meanings, and is used to describe the sensation of sexual tension (*Ich habe Lust* = I should like to, I feel an urge to), as well as the feeling of satisfaction.
22. Anyone who considers this "sacrilegious" should read the treatment of the relation between mother and child by Havelock Ellis (*Das Geschlechtsgefühl*, p. 16), which closely corresponds to mine.
23. For this explanation of the origin of infantile anxiety I have to thank a three-year-old boy whom I once heard pleading out of a dark room: "Auntie, speak to me! I'm frightened because it's so dark." His aunt called out to him: "What good would that do? You can't see me." "That doesn't matter," the child answered, "if someone speaks, it gets light." Thus, what he was afraid of was not the dark, but the absence of someone he loved, and he could promise to calm down as soon as he had received evidence of this person's presence.

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* *Studies on Hysteria*, 1895. J. Breuer says about his patient on whom he first practiced the cathartic method: "The sexual factor was astonishingly undeveloped [in her]."

* The contents of the clearly conscious fantasies of perverts (which in favorable circumstances can be realized in manifest behavior), of the delusional fears of paranoiacs (which are projected in a hostile sense onto other people), and of the unconscious fantasies of hysterics (which psychoanalysis reveals behind their symptoms)—all of these coincide with one another down to the last details.

* Psychoneuroses are also very often associated with manifest inversion. In such cases, the heterosexual current has fallen victim to complete suppression. It is only fair to say that my attention was first drawn to the necessary universality of the tendency to inversion in

psychoneurotics by private statements made by Wilh. Fliess of Berlin, after I had identified it in individual cases.

* We are reminded here of Moll's division of the sexual drive into the contrectation drive and detumescence drive. Contrectation means a need for contact with the skin. The emergence of obsessional reproaches from suppressed sadistic stirrings has been correctly guessed at by Strohmayer on the basis of a case he observed.
* The latter material becomes useful on the basis of the justified expectation that the early years of children who are later to become neurotic are not likely to diverge essentially from those who are to grow up into normal adults at a later stage.
* Once again, it is from W. Fliess that I borrow the term "sexual latency period."
* Thus we find at this early stage what holds good all through life: that sexual satisfaction is the best treatment for insomnia. Most cases of nervous sleeplessness can be traced back to unsatisfied sexual dissatisfaction. It is well known that unscrupulous nurses put crying children to sleep by stroking their genitals.
* H. Ellis spoils the sense of the term invented by him, though, when he counts the whole of hysteria and all the manifestations of masturbation among the phenomena of autoerotism.
* Some persons can remember that in swinging, they felt the impact of moving air upon their genitals as immediate sexual pleasure.
* Cf. the remarks in *The Interpretation of Dreams* on the inevitably fateful undoing in the fable of Oedipus.
* E. Zola, a keen observer of human nature, describes in *La joie de vivre* how a girl, cheerfully and selflessly and without thought of reward, sacrificed to those she loved everything that she possessed or could lay claim to—her money and her life's hopes. This girl's childhood was dominated by an insatiable need for affection, which was transformed into cruelty on an occasion when she found herself slighted in favor of another girl.
* Increase in pertinacity may also possibly be the effect of an especially intensive somatic sexual manifestation in early years.

Bibliography

The following list provides bibliographical details of texts mentioned, but not necessarily fully referenced by Freud in the first edition of *Drei Abhandlungen zur Sexualtheorie* (1905). The editors and the translator would like to thank Christian Huber for compiling this bibliography for the German edition of *Drei Abhandlungen zur Sexualtheorie* (1905), Ph. van Haute, C. Huber, H. Westerink (eds.), Vienna: Vienna University Press, 2015.

Arduin, E. (1900). "Die Frauenfrage und die sexuellen Zwischenstufen," in *Jahrbuch für sexuelle Zwischenstufen mit besonderer Berücksichtigung der Homosexualität* 2: 211–23.

Baldwin, J. M. (1895). *Mental Development in the Child and the Race*, New York: Macmillan. German translation: Baldwin, J. M. (1898). *Die Entwicklung des Geistes beim Kinde und der Rasse*, Berlin: Verlag von Reuther und Reichard.

Bayer, H. (1902). "Zur Entwicklungsgeschichte der Gebärmutter," in *Deutsches Archiv für klinische Medizin* 73.

Bell, J. S. (1902). "A Preliminary Study of the Emotion of Love between the Sexes," in *American Journal of Psychology* 13: 325–54.

Binet, A. (1888). *Études de psychologie expérimentale: le fétichisme dans l'amour*, Paris: Doin.

Bloch, I. (1902). *Beiträge zur Aetiologie der Psychopathia sexualis* (2 vols.), Dresden: H. R. Dohm.

Breuer, J. & Freud, S. (1895). *Studien über Hysterie*, Leipzig & Vienna: Deuticke.

Chevalier, J. (1893). *L'inversion sexuelle*, Lyon: A. Storck.

Dessoir, M. (1894). "Zur Psychologie der Vita Sexualis," in *Allgemeine Zeitschrift für Psychiatrie* 50: 941–75.

Ellis, H. (1898). "Auto-Erotism: A Psychological Study," in *Alienist and Neurologist* 19: 260–99.

Ellis, H. (1901). *Studies in the Psychology of Sex*, vol. 2, *Sexual Inversion*, Philadelphia: F. A. Davis.

Ellis, H. (1903). *Studies in the Psychology of Sex*, vol. 3, *Analysis of the Sexual Impulse, Love and Pain, The Sexual Impulse in Women*, Philadelphia: F. A. Davis.

Ellis, H. (1903). *Das Geschlechtsgefühl: Eine biologische Studie*, H. Kurella (ed.), Würzburg: A. Stuber.

Eulenburg, A. (1895). *Sexuale Neuropathie: Genitale Neurosen und Neuropsychosen der Männer und Frauen*, Leipzig: F. C. W. Vogel.

Eulenburg, A. (1902). *Sadismus und Masochismus*, Wiesbaden: Bergmann.
Freud, S. (1895b). “Über die Berechtigung, von der Neurasthenie einen bestimmten Symptomenkomplex als “Angstneurose” abzutrennen,” *GW* 1.
Freud, S. (1896c). “Zur Ätiologie der Hysterie,” *GW* 1.
Freud, S. (1898a). “Die Sexualität in der Ätiologie der Neurosen,” *GW* 1.
Freud, S. (1899a). “Über Deckerinnerungen,” *GW* 1.
Freud, S. (1900a). *Die Traumdeutung*, *GW* 2.
Freud, S. (1905c). *Der Witz und seine Beziehung zum Unbewußten*, *GW* 6.
Gley, E. (1884). “Les aberrations de l’instinct sexuel d’après des travaux récents,” in *Revue philosophique* 17: 66–92.
Groos, K. (1899). *Die Spiele der Menschen*, Jena: G. Fischer.
Groos, K. (1904). *Das Seelenleben des Kindes*, Berlin: Verlag von Reuther und Reichard.
Halban, J. (1903). “Die Entstehung der Geschlechtscharaktere,” in *Archiv für Gynäkologie* 70: 205–308.
Halban, J. (1904). “Schwangerschaftreaktionen der fötalen Organe und ihre puerperale Involution,” in *Zeitschrift für Geburtshilfe und Gynäkologie* 53.
Hall, G. S. (1904). *Adolescence: Its Psychology and Its Relation to Physiology, Anthropology, Sociology, Sex, Crime, Religion and Education* (2 vols.), New York: D. Appleton.
Heller, T. (1904). *Grundriß der Heilpädagogik*, Leipzig: Wilhelm Engelmann.
Herman, G. (1903). *“Genesis”: Das Gesetz der Zeugung*, vol. 5, *Libido und Mania*, Leipzig: Strauch.
Hirschfeld, M. (1899). “Die objektive Diagnose der Homosexualität,” in *Jahrbuch für sexuelle Zwischenstufen mit besonderer Berücksichtigung der Homosexualität* 1: 4–35.
Hirschfeld, M. (1904). “Das Ergebnis der statistischen Untersuchungen über den Prozentsatz der Homosexuellen,” in *Jahrbuch für sexuelle Zwischenstufen mit besonderer Berücksichtigung der Homosexualität* 6: 109–78.
Kiernan, J. G. (1888). “Sexual Perversion and the Whitechapel Murders,” in *Chicago Medical Standard* 4.
Krafft-Ebing, R. (1886). *Psychopathia sexualis*, Stuttgart: Ferdinand Enke.
Krafft-Ebing, R. (1895). “Zur Erklärung der conträren Sexualempfindung,” in *Jahrbuch für Psychiatrie und Neurologie* 13: 1–16.
Lindner, S. (1879). “Das Saugen an den Fingern, Lippen, etc. bei den Kindern (Ludeln),” in *Jahrbuch für Kinderheilkunde, Neue Folge* 14: 68–91.
Löwenfeld, L. (1891). *Die nervösen Störungen sexuellen Ursprungs*, Wiesbaden: J. F. Bergmann.
Löwenfeld, L. (1899). *Sexualleben und Nervenleiden: Die nervösen Störungen sexuellen Ursprungs*. Wiesbaden: J. F. Bergmann.
Lydston, G. F. (1889). “A Lecture on Sexual Perversion, Satyriasis and Nymphomania,” in *Medical Surgical Reporter* 61, Sept. 7.
Magnan, V. (1885). “Des anomalies, des aberrations et des perversions sexuelles,” in *Annales médico-psychologiques* 1: 447–72.
Moebius, P. J. (1900). *Über Entartung* (*Grenzfragen des Nervenund Seelenlebens* 3): Wiesbaden: J. F. Bergmann.
Moll, A. (1891). *Die konträre Sexualempfindung: Mit Benutzung amtlichen Materials: Mit einem Vorwort von R. von Krafft-Ebing*, Berlin: Fischer’s Medicin, Buchhandlung H. Kornfeld.
Moll, A. (1898). *Untersuchungen über die Libido sexualis*, vol. 1, Berlin: Fischer’s Medicin. Buchhandlung H. Kornfeld.
Näcke, P. (1902). *Über die sogenannte “Moral Insanity”*, Wiesbaden: J. F. Bergmann.
Neugebauer, F. von (1905). “Zusammenstellung der Literatur über Hermaphroditismus beim Menschen,” in *Jahrbuch für sexuelle Zwischenstufen mit besonderer Berücksichtigung der Homosexualität* 7: 471–670.

Pérez, B. (1886). *L'enfant de trois à sept ans*, Paris: Félix Alcan.
Preyer, W. (1882). *Die Seele des Kindes*, Leipzig: Th. Grieben.
Rieger, C. (1900). *Die Castration*, Jena: G. Fischer.
Rohleder, H. (1899). *Die Masturbation*, Berlin: Fischer's Medicin, Buchhandlung H. Kornfeld.
Rousseau, J. J. (1882). *Bekenntnisse*, Stuttgart: Reclams Universal-Bibliothek.
Schrenck-Notzing, A. von (1895). *Ein Beitrag zur Aetiologie der conträren Sexualempfindung*, Vienna: Hölder.
Schrenck-Notzing, A. von (1899). "Literaturzusammenstellung über die Psychologie und Psychopathologie der Vita Sexualis," in *Zeitschrift für Hypnotismus* 9: 98.
Strohmayer, W. (1903). "Zur Charakteristik der Zwangsvorstellungen als 'Abwehrneurose,'" in *Centralblatt f. Nervenheilkunde*, 15 Mai.
Strümpell, L. (1899). *Die pädagogische Pathologie*, 3. Aufl., Leipzig: E. Ungleich.
Sully, J. (1895). *Studies of Childhood*, London: Longmans, Green & Co. German Translation: Sully, J. (1897). *Untersuchungen über die Kindheit*, Leipzig: Ernst Wunderlich.
Taruffi, C. (1903). *Hermaphroditismus und Zeugungsunfähigkeit*, R. Teuscher (Trans.), Berlin: Barsdorf.
Ulrichs, C. H. [recte K. H.] (1898). *Forschungen über das Rätsel der mannmännlichen Liebe*, M. Hirschfeld (ed.), Leipzig: Max Spohr.
Weininger, O. (1903). *Geschlecht und Charakter*, Vienna: W. Braumüller.
Zola, É. (1884). *La joie de vivre*, Paris: Charpentier.

Editors' Bibliography

Abensour, A. (2014). "Drive," in *Dictionary of the Untranslatable: A Philosophical Lexicon*, B. Cassin, E. Apter, J. Lezra, and M. Wood (eds.), Princeton, NJ: Princeton University Press, 230–5.

Benjamin, W. (1923). "The Task of the Translator," in *Illuminations*, H. Zohn (ed.), London: Pimlico, 1999, 70–82.

Bettelheim, B. (1984). *Freud and Man's Soul*, New York: Random House.

Blass, R. (1992). "Did Dora Have an Oedipus Complex? A Re-examination of the Theoretical Context of Freud's 'Fragment of an Analysis,'" in *Psychoanalytic Study of the Child* 47: 159–87.

Bloch, I. (1902). *Beiträge zur Aetiologie der Psychopathia sexualis*, Dresden: Dohrn.

Bowlby, J. (1969). *Attachment and Loss*, New York: Basic Books.

Davidson, A. I. (1984). "The Assault on Freud," in *London Review of Books* 6(12): 9–11.

Davidson, A. I. (2001). *The Emergence of Sexuality: Historical Epistemology and the Formation of Concepts*, Cambridge, MA: Harvard University Press.

Dean, T. (2008). "The Frozen Countenance of Perversion," in *Parallax* 14(2): 93–114.

De Vleminck, J. (2013). *De schaduw van Kaïn: Freuds klinische antropologie van de agressiviteit*, Leuven: Universitaire Pers.

Ellis, H. (1900). *Studies in the Psychology of Sex*, vol. 1, London: F. A. Davis Publishers, 1918.

Freud, S. (1895). "Project for a Scientific Psychology," *Standard Edition* (*SE*) 1, J. Strachey (ed.), London: Hogarth.

Freud, S. (1900a). *The Interpretation of Dreams*, *SE* 4–5.

Freud, S. (1905). *Drei Abhandlungen zur Sexualtheorie*, Leipzig & Vienna: Deuticke.

Freud, S. (1905c). *Jokes and Their Relation to the Unconscious*, *SE* 8.

Freud, S. (1905d). *Three Essays on the Theory of Sexuality*, *SE* 7.

Freud, S. (1905e). "Fragment of an Analysis of a Case of Hysteria," *SE* 7.

Freud, S. (1906a). "My Views on the Part Played by Sexuality in the Aetiology of the Neuroses," *SE* 7.

Freud, S. (1908c). "On the Sexual Theories of Children," *SE* 9.

Freud, S. (1908e). "Creative Writers and Day-Dreaming," *SE* 9.

Freud, S. (1909b). "Analysis of a Phobia in a Five-Year-Old Boy," *SE* 10.

Freud, S. (1910). *Three Contributions to the Theory of Sex*, 2nd ed., A. A. Brill (Trans.), New York & Washington: Nervous and Mental Disease Publishing Co., 1920.

Freud, S. (1911c). "Psychoanalytic Remarks on an Autobiographically Described Case of Paranoia (Dementia Paranoides)," *SE* 12.

Freud, S. (1912–13). *Totem and Taboo*, *SE* 13.

Freud, S. (1913i). “The Predisposition to Obsessional Neurosis,” *SE* 12.
Freud, S. (1914c). “On Narcissism: An Introduction,” *SE* 14.
Freud, S. (1915c). “Instincts and Their Vicissitudes,” *SE* 14.
Freud, S. (1923b). “The Ego and the Id,” *SE* 19.
Freud, S. (1923e). “The Infantile Genital Organization,” *SE* 19.
Freud, S. (1896). *The Origins of Psycho-analysis: Letters to Wilhelm Fliess, Drafts and Notes, 1887–1902*, M. Bonaparte, A. Freud, and E. Kris (eds), E. Mosbacher and J. Strachey (Trans.), London: Basic Books, 1954.
Freud, S. (1985). *The Complete Letters of Sigmund Freud to Wilhelm Fliess 1887–1904*, J. M. Masson (ed.), Cambridge, MA & London: Harvard University Press.
Freud, S. (2015). *Drei Abhandlungen zur Sexualtheorie (1905)*, Ph. Van Haute, Chr. Huber & H. Westerink (eds), Vienna: Vienna University Press.
Fuchs, A. (1902). “Therapeutische Bestrebungen auf dem Gebiete sexueller Perversionen,” in *Jahrbuch für sexuelle Zwischenstufen* 4: 177–86.
Geyskens, T. (2005). *Our Original Scenes: Freud’s Theory of Sexuality*, Leuven: Leuven University Press.
Hacking, I. (1995). *Rewriting the Soul: Multiple Personality and the Science of Memory*, Princeton, NJ: Princeton University Press.
Haute, Ph. Van (2002). “The Introduction of the Oedipus Complex and the Re-invention of Instinct,” in *Radical Philosophy* 115: 7–15.
Haute, Ph. Van (2005). “Psychoanalysis and/as Philosophy: The Anthropological Significance of Pathology in Freud’s *Three Essays on the Theory of Sexuality* and in the Psychoanalytic Tradition,” in *Natureza Humana* 7(2): 359–74.
Haute, Ph. Van (2013). “Het project van een pathoanalyse van het bestaan in Freuds *Drie verhandelingen over de theorie van de seksualiteit*,” in Ph. Van Haute and J. De Vleminck (eds), *Freud als filosoof: Over seksualiteit, psychopathologie en cultuur*, Kalmthout: Pelckmans, 33–49.
Haute, Ph. Van and Geyskens, T. (2004). *Confusion of Tongues: The Primacy of Sexuality in Freud, Ferenczi and Laplanche*, New York: Other Press.
Haute, Ph. Van and Geyskens, T. (2010). “Between Disposition, Trauma and History: How Oedipal Was Dora?,” in *Sexuality and Psychoanalysis: Philosophical Criticisms*, J. De Vleminck & E. Dorfman (eds), Leuven: Leuven University Press, 139–54.
Haute, Ph. Van and Geyskens, T. (2012). *A Non-Oedipal Psychoanalysis? A Clinical Anthropology of Hysteria in the Work of Freud and Lacan*, Leuven: Leuven University Press.
Hirschfeld, M. (1899). “Die objective Diagnose der Homosexualität,” in *Jahrbuch für sexuelle Zwischenstufen*, vol. 1.
Jung, C. G. (1907). *Über die Psychologie der Dementia Praecox: Ein Versuch*, Halle: Verlagsbuchhandlung Carl Marhold.
Jung, C. G. (1912a). *Wandlungen und Symbole der Libido*, Munich: DTV, 1991.
Jung, C. G. (1912b). “Versuch einer Darstellung der psychoanaltischen Theorie,” in *Gesammelte Werke*, Solothurn: Walter Verlag, 4: 107–255.
Krafft-Ebing, R. von (1886). *Psychopathia Sexualis, with Especial Reference to the Antipathic Sexual Instinct: A Medico-Forensic Study*, F. E. Klaf (ed.), New York: Arcade Publishing, 1965.
Krafft-Ebing, R. von (1901). “Neue Studien auf dem Gebiete der Homosexualität,” in *Jahrbuch für sexuelle Zwischenstufen* 3: 1–36.
Kris, E. (1952). “Einleitung zur Erstausgabe,” in *Sigmund Freud: Briefe an Wilhelm Fließ*, Frankfurt: Fischer, 1985, 9–48.
Lacan, J. (1966). *Écrits*, Paris: Seuil.

Laplanche J. and Pontalis, J-B. (1967). *The Language of Psychoanalysis*, D. Nicholson-Smith (Trans.), London: Karnac Books, 1973.
Laplanche, J. (1987). *Nouveaux fondements pour la psychanalyse*, Paris: Presses Universitaires de France.
Laplanche, J. (1992). "The Freud Museum Seminar" (3 May 1990), in J. Laplanche, *Seduction, Translation, Drives*, J. Fletcher & M. Stanton (eds), London: Psychoanalytic Forum/Institute of Contemporary Arts.
Laplanche, J. (2007). *Sexual: la sexualité élargie au sens freudien*, Paris: Presses Universitaires de France.
Lear, J. (2005). *Freud*, New York & London: Routledge.
Leonard, M. (2013). "Freud and Tragedy: Oedipus and the Gender of the Universal," in *Classical Receptions Journal* 5(1): 63–83.
May, U. (2015). *Freud bei der Arbeit: Zur Entstehungsgeschichte der psychoanalytischen Theorie und Praxis, mit einer Auswertung von Freuds Patientenkalender*, Giessen: Psychosozial-Verlag.
Mazaleigue, J. (2014). *Les déséquilibres de l'amour: la genèse du concept de perversion sexuelle, de la revolution française à Freud*, Paris: Ithaque.
Micale, M. (1993). "On the 'Disappearance' of Hysteria: A Study in the Clinical Deconstruction of a Diagnosis," in *Isis* 84(3): 496–526.
Micale, M. (1995). *Approaching Hysteria: Disease and Its Interpretation*, Princeton, NJ: Princeton University Press.
Moll, A. (1898). *Untersuchungen über die* Libido sexualis, vol. 1, Berlin: Fischer.
Moyaert, P. (2012). Seksualiteit is niet te integreren: Hoe Freud over de "conditio humana" nadenkt, in *Filosofie* 22(4): 2–14.
Nietzsche, F. (1875). "Fragment 5" [155], Frühling-Sommer 1875, in *Sämtliche Werke. Kritische Studienausgabe*, Vol. 8, G. Colli & M. Montinari (Eds.), Berlin: Walter de Gruyter; Munich: Deutscher Taschenbuch Verlag, 1980, 83.
Nunberg, H. and Federn, E. (eds) (1962). *Minutes of the Vienna Psychoanalytic Society*, vol. 3, New York: International Universities Press.
Oosterhuis, H. (2000). *Stepchildren of Nature: Krafft-Ebing, Psychiatry, and the Making of Sexual Identity*, Chicago: University of Chicago Press.
Oosterhuis, H. (2012). Sexual Modernity in the Works of Richard von Krafft-Ebing and Albert Moll, in *Medical History* 56(2): 133–55.
Rank, O. & Sachs, H. (1912). "Entwicklung und Ansprüche der Psychoanalyse," in *Imago* 1: 1–16.
Roudinesco, E. (2014). *Sigmund Freud en son temps et dans le nôtre*, Paris: Seuil.
Sauerteig, L. (2012). "Loss of Innocence: Albert Moll, Sigmund Freud and the Invention of Childhood Sexuality around 1900," in *Medical History* 56(2): 156–83.
Schröter, M. (2015). "Über Vergangenheit, Gegenwart und Zukunft der Freud-Editionen in deutscher Sprache," in *Psyche: Zeitschrift für Psychoanalyse* 69(6): 551–69.
Sigusch, V. (2012). "The Sexologist Albert Moll—between Sigmund Freud and Magnus Hirschfeld," in *Medical History* 56(2): 184–200.
Solms, M. (2013). "Notes on the Revised Standard Edition," in *Psychoanalytic Review* 100(1): 201–10.
Spielrein, S. (1912). "Die Destruktion als Ursache des Werdens," in *Sämtliche Schriften*, Freiburg: Verlag Traute Hensch, 98–143.
Stoller, R. (1975). *Perversion: The Erotic form of Hatred*, London: Karnac Classics, 2003.
Strachey, J. (1966). Preface, in *SE* 1, xiii–xxii.
Sulloway, F. (1979). *Freud: Biologist of the Mind*, New York: Basic Books.

Tylor, E. B. (1871). *Die Anfänge der Cultur. Untersuchungen über die Entwicklung von Mythologie, Philosophie, Religion, Kunst und Sitte*, Vol. I, J. W. Spengel & F. Poske (Transl.), Leipzig: C. F. Winter'sche Verlagshandlung, 1873.
Westerink, H. (2009). *A Dark Trace: Sigmund Freud on the Sense of Guilt*, Leuven: Leuven University Press.
Westerink, H. (2014). "Demonical Possession and the Historical Construction of Melancholy and Hysteria," in *History of Psychiatry* 25(3): 335–49.
Westerink, H. (2015). "De problematische plaats van de woede in het denken van Freud over agressiviteit," in *Tijdschrift voor Filosofie* 77(4): 719-46.
Whiteside, S. (2006). Translator's preface, in S. Freud, *The Psychology of Love*, A. Phillips (ed.), S. Whiteside (Trans.), London: Penguin, xxvii–xxxii.

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